

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001402

Entity Name: BFEN, INC.

FILED
Jul 06, 2007
Secretary of State

Current Principal Place of Business:

125 WORTH AVENUE, SUITE 219
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

125 WORTH AVENUE, SUITE 219
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 94-3038456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES-FAULI CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DRIVE, SUITE 500E
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BURNS, BRIAN P
Address: 125 WORTH AVENUE, SUITE 219
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: WOODBERRY, PAUL
Address: 100 BUSH STREET, SUITE 1250
City-St-Zip: SAN FRANCISCO, CA 94104

Title: D () Delete
Name: QUICK, THOMAS C
Address: 100 BUSH STREET, SUITE 1250
City-St-Zip: SAN FRANCISCO, CA 94104

Title: D () Delete
Name: MCELVENNY, RALPH T JR.
Address: 100 BUSH STREET, SUITE 1250
City-St-Zip: SAN FRANCISCO, CA 94104

Title: CFO () Delete
Name: POST, S. DOUGLAS
Address: 100 BUSH STREET, SUITE 1250
City-St-Zip: SAN FRANCISCO, CA 94104

Title: SVP () Delete
Name: ARONOFF, STUART B
Address: 100 BUSH STREET, SUITE 1250
City-St-Zip: SAN FRANCISCO, CA 94104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: S. DOUGLAS POST

CFO

07/06/2007

Electronic Signature of Signing Officer or Director

Date