

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000001402

Entity Name: BFEN, INC.

FILED  
Oct 01, 2009  
Secretary of State

## Current Principal Place of Business:

125 WORTH AVENUE, SUITE 219  
PALM BEACH, FL 33480

## New Principal Place of Business:

## New Mailing Address:

100 BUSH STREET  
1730  
SAN FRANCISCO, CA 94104

## Current Mailing Address:

125 WORTH AVENUE, SUITE 219  
PALM BEACH, FL 33480

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: MICHELLE SANDERSON

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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: P ( ) Delete  
Name: BURNS, BRIAN P JR  
Address: 100 BUSH STREET 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: BRIAN P. BURNS, JR.

P

10/01/2009

Electronic Signature of Signing Officer or Director

Date