2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004147

FILED Apr 27, 2012 Secretary of State

Entity Name: MOTORCYCLE SAFETY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2 JENNER , STE. 150 2 JENNER IRVINE, CA 92618 US STE 150

IRVINE, CA 92618 US

Current Mailing Address: New Mailing Address:

2 JENNER , STE. 150 2 JENNER IRVINE, CA 92618 US STE 150

IRVINE, CA 92618 US

FEI Number: 52-0963363 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

OFFICERS AND DIRECTORS:

 Title:
 PRES

 Name:
 BUCHE, TIM

 Address:
 2 JENNER, STE. 150

 City-St-Zip:
 IRVINE, CA 92618

Title: T/S

 Name:
 HIGGINS, GARY

 Address:
 1919 TORRANCE BLVD

 City-St-Zip:
 TORRANCE, CA 90501 US

Title: VP

Name: DICORPO, JOSEPH Address: 2 JENNER, STE. 150 City-St-Zip: IRVINE, CA 92618

Title:

Name: BRENAN, RUSS
Address: 9950 JERONIMO ROAD
City-St-Zip: IRVINE, CA 92618

Title:

Name: CHICHLOWSKI, JULIE
Address: 3700 WEST JUNEAU AVE
City-St-Zip: MILWUAKEE, WI 53208

Title:

Name: ALSIP, ROBERT

Address: 3251 EAST IMPERIAL HGWY

City-St-Zip: BREA, CA 92821

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH DICORPO VP 04/27/2012