

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000002390

FILED  
Sep 30, 2009  
Secretary of State

**Entity Name:** BICYCLE MESSENGER EMERGENCY FUND, INC.

**Current Principal Place of Business:**

231 S. 6TH ST.  
EL CENTRO, CA 92243

**New Principal Place of Business:**

**Current Mailing Address:**

231 S. 6TH ST.  
EL CENTRO, CA 92243

**New Mailing Address:**

**FEI Number:** 20-0842274      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

DOERR, KENNETH D  
240 S PINEAPPLE AVE  
10TH FLOOR  
SARASOTA, FL 34236 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: KENNETH DOERR

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: VALLERY, JEAN A  
Address: 231 S. 6TH ST.  
City-St-Zip: EL CENTRO, CA 92243

Title: V ( ) Delete  
Name: REYNOLDS, KIMBERLY A  
Address: 1121 24TH ST.,NW #101  
City-St-Zip: WASHINGTON, DC 20037

Title: T ( ) Delete  
Name: BRUNELLE, LUCAS J  
Address: 1112 BOYLSTON STREET,STE. 400  
City-St-Zip: BOSTON, MA 02215

**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:

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

SIGNATURE: JEAN VALLERY

CEO

09/30/2009

Electronic Signature of Signing Officer or Director

Date