

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004147

Entity Name: MOTORCYCLE SAFETY FOUNDATION, INC.**Current Principal Place of Business:**2 JENNER
STE 150
IRVINE, CA 92618**Current Mailing Address:**2 JENNER
STE 150
IRVINE, CA 92618 US**FEI Number:** 52-0963363**Certificate of Status Desired:** No**Name and Address of Current 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

Officer/Director Detail :

Title	PRES
Name	BUCHE, TIM
Address	2 JENNER, STE. 150
City-State-Zip:	IRVINE CA 92618

Title	T/S
Name	MARTINI, GARY
Address	1919 TORRANCE BLVD
City-State-Zip:	TORRANCE CA 90501

Title	VP
Name	GLADDEN, ROBERT
Address	2 JENNER, STE. 150
City-State-Zip:	IRVINE CA 92618

Title	T
Name	BRENAN, RUSS
Address	9950 JERONIMO ROAD
City-State-Zip:	IRVINE CA 92618

Title	TRUSTEE
Name	PRAKASH, ANOOP
Address	3700 WEST JUNEAU AVE
City-State-Zip:	MILWAUKEE WI 53208

Title	T
Name	ALSIP, ROBERT
Address	3251 EAST IMPERIAL HWY
City-State-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: ROBERT GLADDEN**VICE PRESIDENT****04/27/2018**

Electronic Signature of Signing Officer/Director Detail

Date