

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213566073
1.) CORPORATION NAME: Central Virginia Fallen Biker Committee		DUE DATE: 6/30/2013
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: VALERIE TRAVERS 717 LAVON DRIVE RICHMOND, VA		SCC ID NO: 07102510
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY		5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: VA		
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: PO BOX 3103 CITY/ST/ZIP: CHESTER, VA 23831		
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.		
NAME: VALERIE E TRAVERS TITLE: DIRECTOR ADDRESS: 717 LA VON DRIVE CITY/ST/ZIP/CO: RICHMOND, VA 23227	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Brenda M Coles TITLE: ASST TREASURER ADDRESS: 2334 Harpoon Court CITY/ST/ZIP/CO: Henrico, VA 23294	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Nicole Gary TITLE: TREASURER ADDRESS: 4540 Forrestal Road CITY/ST/ZIP/CO: Chester, VA 23831	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ VALERIE E TRAVERS	VALERIE E TRAVERS, DIRECTOR	3/25/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		