

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 04, 2006**  
**Secretary of State**

DOCUMENT# F05000005419

Entity Name: ROSEMOOR FOUNDATION, INC.

**Current Principal Place of Business:**

P.O. BOX 1541 MURRAY HILL STATION  
NEW YORK, NY 101561541

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1541 MURRAY HILL STATION  
NEW YORK, NY 101561541

**New Mailing Address:**

FEI Number: 13-3281516      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SEGARRA, HORTENSIA  
7100 SW 75TH AVE  
MIAMI, FL 331432800 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ECKMAN, MARY ELISE  
Address: 243 LEXINGTON AVENUE  
City-St-Zip: NEW YORK, NY 100164605

Title: VD      ( ) Delete  
Name: MALONEY, DOROTHY A  
Address: 2709 36TH ST., N.W.  
City-St-Zip: WASHINGTON, DC 200071422

Title: SD      ( ) Delete  
Name: VALDEAVELLANO, MARIA  
Address: 243 LEXINGTON AVENUE  
City-St-Zip: NEW YORK, NY 100164605

Title: TD      ( ) Delete  
Name: TAYLOR, JACQUELINE Y  
Address: 243 LEXINGTON AVENUE  
City-St-Zip: NEW YORK, NY 100164605

Title: D      ( ) Delete  
Name: DECOSSE, CAROLE  
Address: 6073 N FOREST GLEN  
City-St-Zip: CHICAGO, IL 60618

Title: D      ( ) Delete  
Name: OATES, MARIE  
Address: 65 BRADLEE ROAD  
City-St-Zip: MILTON, MA 02186

**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 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: JACQUELINE Y. TAYLOR

TD

01/04/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date