

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000005419

**FILED**  
**Jan 07, 2014**  
**Secretary of State**  
**CC7882566678**

**Entity Name:** ROSEMOOR FOUNDATION, INC.

**Current Principal Place of Business:**

117 EAST 70TH STREET  
NEW YORK, NY 10021

**Current Mailing Address:**

P.O. BOX 1541 MURRAY HILL STATION  
NEW YORK, NY 10156-1541

**FEI Number:** 13-3281516

**Certificate of Status Desired:** No

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

SEGARRA, HORTENSIA  
344 PALM TRAIL  
DELRAY BEACH, FL 33483-5529 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 PD  
Name ECKMAN, MARY ELISE  
Address 243 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10016-4605

Title VD  
Name MALONEY, DOROTHY A  
Address 2709 36TH ST., N.W.  
City-State-Zip: WASHINGTON DC 20007-1422

Title TD  
Name TAYLOR, JACQUELINE Y  
Address 243 LEXINGTON AVENUE  
City-State-Zip: NEW YORK NY 10016-4605

Title D  
Name DECOSSE, CAROLE  
Address 2709 36TH STREET, NW  
City-State-Zip: WASHINGTON DC 20007

Title D  
Name OATES, MARIE  
Address 243 LEXINGTON AVE  
City-State-Zip: NEW YORK NY 10016

Title SECRETARY  
Name RACCA, MARIA PILAR  
Address 80 LOMBARD ST  
City-State-Zip: NEWTON MA 02458

*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:** JACQUELINE Y. TAYLOR

**TREASURER**

**01/07/2014**

Electronic Signature of Signing Officer/Director Detail

Date