

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001186

FILED  
Jan 11, 2012  
Secretary of State

**Entity Name:** GAVCARR FOUNDATION INCORPORATED

**Current Principal Place of Business:**

40 MEMORIAL HWY  
7E  
NEW ROCHELLE, NY 10801

**New Principal Place of Business:**

**Current Mailing Address:**

40 MEMORIAL HWY  
7E  
NEW ROCHELLE, NY 10801

**New Mailing Address:**

**FEI Number:** 03-0511723

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SEALEY, KIIMA  
3202 HEATHERBROOK WAY  
TAMPA, FL 32618 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:** D  
**Name:** WESTCARR, EULIE  
**Address:** 40 MEMORIAL HWY, 7E  
**City-St-Zip:** NEW ROCHELLE, NY 10801

**Title:** D  
**Name:** SOLOMON, ARLENE W  
**Address:** 1110 OLIVINE DR  
**City-St-Zip:** ALPHARETTA, GA 30022

**Title:** DEVP  
**Name:** EDMEAD, GENEVA  
**Address:** 3202 HEATHERBROOK WAY  
**City-St-Zip:** TAMPA, FL 32618

**Title:** DCEO  
**Name:** WESTCARR-GRAY, SEANA  
**Address:** 40 MEMORIAL HWY, 7E  
**City-St-Zip:** NEW ROCHELLE, NY 10801

**Title:** D  
**Name:** GRAY, ALRICH  
**Address:** 40 MEMORIAL HWY, 7E  
**City-St-Zip:** NEW ROCHELLE, NY 10801

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:** SEANA WESTCARR-GRAY

DCEO

01/11/2012

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

\_\_\_\_\_  
Date