

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213515313

1.) CORPORATION NAME:

NFL Player Care Foundation

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1740390**

5.) STOCK INFORMATION

CLASS AUTHORIZED

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 345 PARK AVENUE

CITY/ST/ZIP: NEW YORK, NY 10154

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: HAROLD R HENDERSON
TITLE: PRESIDENT
ADDRESS: 345 PARK AVE
CITY/ST/ZIP/CO: NEW YORK, NY 10154

OFFICER

DIRECTOR

NAME: DENNIS CURRAN
TITLE: SEC/TREAS
ADDRESS: 345 PARK AVE
CITY/ST/ZIP/CO: NEW YORK, NY 10154

OFFICER

DIRECTOR

NAME: LAWRENCE L LAMADE
TITLE: ASSISTANT SEC
ADDRESS: 1333 NEW HAMPSHIRE AVE SW
CITY/ST/ZIP/CO: WASHINGTON, DC 20036-1564

OFFICER

DIRECTOR

NAME: MARY AGEE
TITLE: DIRECTOR
ADDRESS: 10455 WHITE GRANITE DRIVE
SUITE 100
CITY/ST/ZIP/CO: OAKTON, VA 22124

OFFICER

DIRECTOR

NAME: ANDRE COLLINS
TITLE: DIRECTOR
ADDRESS: 1133 20TH STREET NW
CITY/ST/ZIP/CO: WASHINGTON, DC 20036

OFFICER

DIRECTOR

NAME: WILLIE LANIER
TITLE: DIRECTOR
ADDRESS: 2911 W BRIGSTOCK ROAD
CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23113

OFFICER

DIRECTOR

| | | | |
|--|---|----------------------------------|--|
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | RANDY MINNIEAR DIRECTOR 739 WESTPORT ROAD EASTON, CT 06612 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | OZZIE NEWSOME DIRECTOR 1101 RUSSELL STREET BALTIMORE, MD 21230 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | KENNETH SCHERRER DIRECTOR 2339 MULHOLLAND DRIVE WOODLAND HILLS, CA 91364 | <input type="checkbox"/> OFFICER | <input checked="" 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/ LAWRENCE L LAMADE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | LAWRENCE L LAMADE, ASSISTANT SEC PRINTED NAME AND CORPORATE TITLE | 3/27/2013 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. | | | |