

# SECURITIES AND EXCHANGE COMMISSION

## FORM 3

Filing Date: **2009-10-13** | Period of Report: **2009-09-30**  
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### REPORTING OWNER

#### McGuane Scott

CIK: **1474344**

Type: **3** | Act: **34** | File No.: **000-15862** | Film No.: **091118024**

Mailing Address  
700 CENTRAL EXPY S  
SUITE 110  
ALLEN TX 75013

### ISSUER

#### GVC VENTURE CORP

CIK: **814286** | IRS No.: **133018466** | State of Incorporation: **DE** | Fiscal Year End: **0630**  
SIC: **9995** Non-operating establishments

Mailing Address  
425 E 58TH ST  
SUITE 31C  
NEW YORK NY 10022-2300

Business Address  
425 EAST 58TH ST  
SUITE 31C  
NEW YORK NY 10022-2300  
2127531812

**FORM 3****UNITED STATES SECURITIES AND EXCHANGE  
COMMISSION**

Washington, D.C. 20549

**OMB APPROVAL**

OMB Number: 3235-0104  
 Expires: 02/28/2011  
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 hours per response 0.5

**INITIAL STATEMENT OF BENEFICIAL  
OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of  
 the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment  
 Company Act of 1940

1. Name and Address of Reporting Person * <u>McGuane Scott</u> (Last) (First) (Middle) 700 CENTRAL EXPY S, SUITE 110 (Street) ALLEN, TX 75013 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/ Year) 09/30/2009	3. Issuer Name and Ticker or Trading Symbol <u>GVC VENTURE CORP [GPAX]</u> 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) _____ Director _____ 10% Owner <u>X</u> Officer (give title below) _____ Other (specify below) <u>Chief Marketing/Sales Officer</u> 5. If Amendment, Date Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check applicable line) <u>X</u> Form Filed by One Reporting Person _____ Form Filed by More than One Reporting Person
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**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/ Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock Options	09/30/2009	01/25/2014	Series Z Convertable Preferred Stock, \$.001 par value	2,778	\$0.94	D	
Stock Options	01/26/2010	01/25/2014	Series Z Convertable Preferred Stock, \$.001 par value	2,778	\$0.94	D	
Stock Options	07/26/2009	01/25/2014	Series Z Convertable Preferred Stock, \$.001 par value	2,778	\$0.94	D	
Stock Options	01/26/2011	01/25/2014	Series Z Convertable Preferred Stock, \$.001 par value	2,778	\$0.94	D	
Stock Options	02/21/2010	08/20/2014	Series Z Convertable Preferred Stock, \$.001 par value	1,389	\$1.59	D	
Stock Options	08/21/2010	08/20/2014	Series Z Convertable Preferred Stock, \$.001 par value	1,389	\$1.59	D	

Stock Options	02/21/2011	08/20/2014	Series Z Convertable Preferred Stock, \$.001 par value	1,389	\$1.59	D	
Stock Options	08/21/2011	08/20/2014	Series Z Convertable Preferred Stock, \$.001 par value	1,389	\$1.59	D	

### Signatures

Scott McGuane

\*\* Signature of Reporting Person

10/13/2009

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.**