

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000697

**Entity Name:** FORGOTTEN SOLDIERS OUTREACH, INC.

**FILED**  
**Jun 09, 2020**  
**Secretary of State**  
**9814058008CC**

**Current Principal Place of Business:**

3550 23RD AVENUE S.  
SUITE 7  
LAKE WORTH, FL 33461

**Current Mailing Address:**

3550 23RD AVENUE S.  
SUITE 7  
LAKE WORTH, FL 33461 US

**FEI Number: 51-0493205**

**Certificate of Status Desired: No**

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

MOURING, C. ANNELIES  
4276 PINE HOLLOW CIRCLE  
GREENACRES, FL 33463 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:** C. ANNELIES MOURING

06/09/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name CASHMERE, JAY  
Address 1100 BANYAN BOULEVARD  
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY  
Name MOURING, C. ANNELIES  
Address 4276 PINE HOLLOW CIRCLE  
City-State-Zip: GREENACRES FL 33463

Title TREASURER  
Name SNOW, ARTHUR  
Address 20967 SPRINGS TERRACE  
City-State-Zip: BOCA RATON FL 33428

Title VC  
Name DEBEVEC, CHUCK  
Address 130 NE TWYLITE TER  
City-State-Zip: PORT ST.LUCIE FL 34963

Title CHAIRMAN  
Name MCCARTHY, CHRISTOPHER D.  
Address 3550 23RD AVENUE S.  
SUITE 7  
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR  
Name JACKSON, RET. MAJOR GENERAL WAYNE  
Address 3550 23RD AVENUE S.  
SUITE 7  
City-State-Zip: LAKE WORTH FL 33461

Title CEO  
Name CHAUNCEY-ZELNAR, LYNELLE  
Address 3550 23RD AVENUE S.  
SUITE 7  
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR  
Name DEE, JOANNE  
Address 3550 23RD AVENUE S.  
SUITE 7  
City-State-Zip: LAKE WORTH FL 33461

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*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:** LYNELLE CHAUNCEY-ZELNAR

**EXECUTIVE  
DIRECTOR/CEO**

06/09/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           BROWN, WALTER  
Address        3550 23RD AVENUE S.  
                  SUITE 7  
City-State-Zip: LAKE WORTH FL 33461

Title           DIRECTOR  
Name           ARCURI, WILLIAM  
Address        3550 23RD AVENUE S.  
                  SUITE 7  
City-State-Zip: LAKE WORTH FL 33461