

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000008564

Entity Name: UNFORSAKEN WOMEN CORP**Current Principal Place of Business:**12820 AUSTIN COVE CT.
CLERMONT, FL 34711**Current Mailing Address:**12820 AUSTIN COVE CT.
CLERMONT, FL 34711 US**FEI Number:** 46-3705917**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MYDLO, MAUREEN D
12820 AUSTIN COVE CT.
CLERMONT, FL 34711 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 | EDIR |
| Name | MYDLO, MAUREEN D |
| Address | 12820 AUSTIN COVE CT. |
| City-State-Zip: | CLERMONT FL 34711 |
| Title | TREASURER |
| Name | O'CONNOR, CAROLINE |
| Address | 10742 VISTA DEL SOL CIRCLE |
| City-State-Zip: | CLERMONT FL 34711 |
| Title | PRESIDENT |
| Name | ROBINSON, PATRICIA |
| Address | 11511 NELLIE OAKS BEND |
| City-State-Zip: | CLERMONT FL 34711 |

| | |
|-----------------|-----------------------|
| Title | SECRETARY |
| Name | PETERSON, MARIA C |
| Address | 1209 WINDY BLUFF DR |
| City-State-Zip: | MINNEOLA FL 34715 |
| Title | BOARD MEMBER |
| Name | HEALY, MARY |
| Address | 201 B EAST SUMTER ST. |
| City-State-Zip: | MINNEOLA FL 34715 |
| Title | BOARD MEMBER |
| Name | MYDLO, THOMAS M II |
| Address | 12820 AUSTIN COVE CT. |
| City-State-Zip: | CLERMONT FL 34711 |

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: MAUREEN D MYDLO**EXECUTIVE DIRECTOR****04/05/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date