## 2018 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

Date

FILED Mar 05, 2018

**Secretary of State** 

CC7388666906

Officer/Director Detail:

Title VC Title EDIR

NameHAMMOND, JEAN TNameMYDLO, MAUREEN DAddress3856 GLENFORD DR.Address12820 AUSTIN COVE CT.City-State-Zip:CLERMONT FL 34711City-State-Zip:CLERMONT FL 34711

Title SECRETARY Title TREASURER

Name PETERSON, MARIA C Name O'CONNOR, CAROLINE

Address 1209 WINDY BLUFF DR Address 10742 VISTA DEL SOL CIRCLE

City-State-Zip: MINNEOLA FL 34715 City-State-Zip: CLERMONT FL 34711

Title BOARD MEMBER Title PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Name HEALY, MARY Name ROBINSON, PATRICIA

Address 201 B EAST SUMTER ST. Address 11511 NELLIE OAKS BEND

City-State-Zip: MINNEOLA FL 34715 City-State-Zip: CLERMONT FL 34711

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 MYDLO EXECUTIVE DIRECTOR 03/05/2018