

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000008564

**FILED**  
**Apr 01, 2016**  
**Secretary of State**  
**CC2078235225**

**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

**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 VC  
Name HAMMOND, JEAN T  
Address 3856 GLENFORD DR.  
City-State-Zip: CLERMONT FL 34711

Title TR  
Name AMARAL, PAMELA J  
Address 10346 DWIGHTS RD.  
City-State-Zip: CLERMONT FL 34714

Title EDIR  
Name MYDLO, MAUREEN D  
Address 12820 AUSTIN COVE CT.  
City-State-Zip: CLERMONT FL 34711

Title SECRETARY  
Name PETERSON, MARIA C  
Address 1209 WINDY BLUFF DR  
City-State-Zip: MINNEOLA FL 34715

*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:** PAMELA AMARAL

**TREASURER**

**04/01/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date