

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000007140

**Entity Name:** THE FORGOTTEN WOMEN PROJECT, INC.

**Current Principal Place of Business:**

1101 SANTA CRUZ WAY  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

P.O. BOX 620924  
OVEIDO, FL 32762-0924 US

**FEI Number: 81-3324024**

**Certificate of Status Desired: No**

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

BOSTWICK, MARJORIE  
300 N. FLAGLER AVE  
4  
FLAGLER BEACH, FL 32136 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 P  
Name BOSTWICK, MARJORIE  
Address 300 N. FLAGLER AVE. #4  
City-State-Zip: FLAGLER BEACH FL 32136

Title VP  
Name WEAVER, KYEESHA  
Address 4B UNION COURT  
City-State-Zip: PALM COAST FL 32164

Title TREASURER  
Name BOTTINI, PETER BLAISE  
Address 3801 EVE. DRIVE. EAST  
City-State-Zip: JACKSONVILLE FL 32246

Title DIR  
Name MATHEWS, HOLLY  
Address 8787 BAYONNE ROAD  
City-State-Zip: JACKSONVILLE, FL 32256

*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: MARJORIE BOSTWICK**

**PRESIDENT**

**04/01/2017**

Electronic Signature of Signing Officer/Director Detail

Date