

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002867

FILED
Apr 03, 2008
Secretary of State

Entity Name: BARKALLAH ISLAMIC COMMUNITY CENTER OF TAMPA, INC.

Current Principal Place of Business:

4210 E REGNAS AVE
TAMPA, FL 33617 68

New Principal Place of Business:

Current Mailing Address:

4210 E. REGNAS AVE
TAMPA, FL 33617 68

New Mailing Address:

FEI Number: 59-3678545 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUMAH, YAKEEN
916 YORK DR
BRANDON, FL 33510 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OYEBAMIJI, RAZAQ
Address: 2920 ANGELA COURT
City-St-Zip: TAMPA, FL

Title: GS () Delete
Name: JUMAH, YAKEEN
Address: 916 YORK DRIVE
City-St-Zip: BRANDON, FL 33510

Title: T () Delete
Name: ADEROJU, FATAI
Address: 801 FRANKFORD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: FS () Delete
Name: ABIMBOLA, MUIDEEN
Address: 1313 FRANKFORD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: AUD () Delete
Name: BALOGUN, TAJUDEEN
Address: 1504 SILKTREE CT.
City-St-Zip: BRANDON, FL 33511

Title: VPS () Delete
Name: FADEYI, DAUDA
Address: 11362 BROOKGREEN DR
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: FS (X) Change () Addition
Name: ABIMBOLA, MUIDEEN
Address: 11447 DUTCH IRIS DRIVE
City-St-Zip: RIVERVIEW, FL 33549

Title: AUD (X) Change () Addition
Name: BALOGUN, TAJUDEEN
Address: 11122 RUNNING PINE DR
City-St-Zip: RIVERVIEW, FL 33569

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RO

_____ Electronic Signature of Signing Officer or Director

D

04/03/2008

_____ Date