## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N16298

FILED Jan 13, 2007 Secretary of State

Entity Name: SOUTHWEST FLORIDA MUSLIM STUDENTS ASSOCIATION CHAPTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** C/O H.E. SHUAYB 11373 CORTEZ BLVD #306 BROOKSVILLE, FL 34613 **Current Mailing Address: New Mailing Address:** 11373 CORTEZ #306 BROOKSVILLE, FL 34613 US FEI Number: 31-1128906 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHUAYB, H.E. 11373 CORTEZ BLVD #306 BROOKSVILLE, FL 34613 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MAHMALGY, G MAHMALGY, G Name: Name: **11373 CORTEZ** Address: 11373 CORTEZ Address: City-St-Zip: BROOKSVILLE, FL City-St-Zip: BROOKSVILLE, FL 34613 Title: Title: () Delete (X) Change ( ) Addition JOUD, A Name: JOUD, A Name: Address: 11373 CORTEZ Address: 12900 CORTEZ City-St-Zip: BROOKSVILLE, FL City-St-Zip: BROOKSVILLE, FL 34613 Title: () Delete Title: (X) Change ( ) Addition SHUAYB, H SHUAYB, H Name: Name: 11373 CORTEZ, SUITE 306 Address: 11373 CORTEZ Address: City-St-Zip: BROOKSVILLE, FL City-St-Zip: BROOKSVILLE, FL 34613 ( ) Delete Title: D Title: () Change () Addition Name: MAHMALJY, G., Name: Address: 11373 CORTEZ Address: City-St-Zip: BROOKSVILLE, FL City-St-Zip: Title: () Delete Title: () Change () Addition BAIG, MIRZA Name: Name: 3367 GATOR TRAIL Address: Address: City-St-Zip: SPRING HILL, FL 34604 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition NIMER M Name: Name: Address: Address: 5040 WILLOW OAK LANE SPRING HILL, FL 34607 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HUSAM E. SHUAYB T 01/13/2007