

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38380

FILED
Apr 07, 2009
Secretary of State

Entity Name: HUSSEINI ISLAMIC CENTER OF FLORIDA, INC.

Current Principal Place of Business:

5211 HESTER AVE
SANFORD, FL 32773 US

New Principal Place of Business:

Current Mailing Address:

5211 HESTER AVE
SANFORD, FL 32773 US

New Mailing Address:

FEI Number: 59-3131142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, SACHOO
#130 4044 W LAKE MARY BLVD
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

JESSA, RIZWAN
2220 PINE OAK TRAIL
SANFORD, FL 32773 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: RIZWAN JESSA

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOHAMMED, SHARIF
Address: 1610 EDELSHERAN ROAD
City-St-Zip: LAKE MARY, FL 32746 US

Title: D () Delete
Name: JUSAB, SUHAILABBAS
Address: 2144 NORTHUMBRIA DR
City-St-Zip: SANFORD, FL 32771 US

Title: D () Delete
Name: ALI, SACHOO
Address: #130 4044 W LAKE MARY BLVD
City-St-Zip: LAKE MARY, FL 32746 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JIVRAJ, RIYAAZ
Address: 8352 GREY BARK COURT
City-St-Zip: SANFORD, FL 32771 US

Title: VP (X) Change () Addition
Name: DHANJI, RAZA
Address: 1616 PINE BAY DR
City-St-Zip: LAKE MARY, FL 32746 US

Title: S (X) Change () Addition
Name: DHARSI, MURTAZA
Address: 116 WILLOWBAY RIDGE ST
City-St-Zip: SANFORD, FL 32771 US

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: RIYAAZ JIVRAJ

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date