

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

DOCUMENT# N15000004194

**Entity Name:** ICNA FLORIDA, INC

**Current Principal Place of Business:**

12519 SUNCHASE DRIVE  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

12519 SUNCHASE DRIVE  
JACKSONVILLE, FL 32246

**FEI Number:** 47-4750707

**Certificate of Status Desired:** No

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

ILYAS, MOHAMMAD  
12519 SUNCHASE DRIVE  
JACKSONVILLE, FL 32246 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 ILYAS, MOHAMMAD  
Address 12519 SUNCHASE DRIVE  
City-State-Zip: JACKSONVILLE FL 32246

Title VP  
Name ASAD, ASAM  
Address 5800 N. FEDERAL HWY #2  
City-State-Zip: BOCA RATON FL 33487

Title VP  
Name YUNUS, MOHAMMAD  
Address 5800 N. FEDERAL HWY #2  
City-State-Zip: BOCA RATON FL 33487

Title SE  
Name RAUF KHAN, ABDUL  
Address 5800 N. FEDERAL HWY #2  
City-State-Zip: BOCA RATON FL 33487

Title D  
Name YOUSUF, SYED  
Address 5800 N. FEDERAL HWY #2  
City-State-Zip: BOCA RATON FL 33487

*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:** MOHAMMAD ILYAS

**PRESIDENT**

**01/18/2017**

Electronic Signature of Signing Officer/Director Detail

Date