

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 07, 2005  
Secretary of State**

DOCUMENT# 733706

Entity Name: ISLAMIC SOCIETY OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

ISCF  
1089 N GOLDENROD RD  
ORLANDO, FL 32807 US

**Current Mailing Address:**

**New Mailing Address:**

PO BOX 338  
GOLDENROD, FL 32733 US

FEI Number: 51-0188054      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

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

MUSRI, MUHAMMAD  
1089 N. GOLDENROD RD.  
ORLANDO, FL 32807 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:**

Title: PD ( ) Delete  
Name: MUSRI, MUHAMMAD  
Address: 1089 N. GOLDENROD RD.  
City-St-Zip: ORLANDO, FL 32807

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

Title: SD ( ) Delete  
Name: GIBBS, W. ERNEST  
Address: 3378 HILLMONT CIR.  
City-St-Zip: ORLANDO, FL 32817

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

Title: D ( ) Delete  
Name: AKHTAR, SHAHEDA  
Address: 4564 THORNLEA RD.  
City-St-Zip: ORLANDO, FL 32817

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

Title: D ( ) Delete  
Name: KASU, ABDULTIF  
Address: 8008 COTE CT  
City-St-Zip: ORLANDO, FL 32836

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

Title: D ( ) Delete  
Name: THAKUR, MURAD  
Address: 5480 CURRY FORD ROAD  
City-St-Zip: ORLANDO, FL 32812

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

Title: D ( ) Delete  
Name: ZAMAN, AHMADI B  
Address: 412 BARCLAY CT  
City-St-Zip: ALTAMONTE SPGS, FL 32701

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MUHAMMAD MUSRI

PRES

03/07/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date