

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745202

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** ISLAMIC CENTER OF NORTHEAST FLORIDA, INC.

**Current Principal Place of Business:**

2333 ST JOHN'S BLUFF RD S  
JACKSONVILLE, FL 32246 US

**New Principal Place of Business:**

**Current Mailing Address:**

2333 ST JOHN'S BLUFF RD S  
JACKSONVILLE, FL 32246 US

**New Mailing Address:**

**FEI Number:** 59-1882880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHAIKH, ASHRAF  
2333 ST JOHN'S BLUFF RD S  
JACKSONVILLE, FL 32246 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, C  
Name: MONA, MOHAMMAD  
Address: 2333 ST JOHN'S BLUFF RD S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D, V  
Name: ASSALI, HAFEZ  
Address: 2333 ST JOHN'S BLUFF RD S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D, S  
Name: AHMED, PARVEZ  
Address: 2333 ST JOHN'S BLUFF RD S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D, T  
Name: MANSOORI, MUHAMMAD  
Address: 2333 ST JOHN'S BLUFF RD S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D  
Name: HAIDER, NAEEM  
Address: 2333 ST JOHN'S BLUFF RD S  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D  
Name: IMAM, HUSSAIN  
Address: 2333 ST JOHN'S BLUFF RD S  
City-St-Zip: JACKSONVILLE, FL 32246

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:** M. MANSOORI

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04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date