

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003769

FILED  
Mar 05, 2008  
Secretary of State

Entity Name: ISLAMIC SOCIETY OF SOUTH ORLANDO, INC.

**Current Principal Place of Business:**

12515 BRITWELL COURT  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

12515 BRITWELL COURT  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 59-3663703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELSABAGH, MAHMOUD  
12515 BRITWELL COURT  
ORLANDO, FL 32837 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: PD ( ) Delete  
Name: ELSABAGH, MAHMOUD A  
Address: 12515 BRITWELL COURT  
City-St-Zip: ORLANDO, FL 32837

Title: TD ( ) Delete  
Name: RIAD, ASHRAF  
Address: 908 HORSESHOE FALLS DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: MD ( ) Delete  
Name: ALHILAL, ADEL  
Address: 2200 WYNDAM WAY  
City-St-Zip: KISSIMMEE, FL 34743

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: TD (X) Change ( ) Addition  
Name: ELSABAGH, MAHMOUD A  
Address: 12515 BRITWELL COURT  
City-St-Zip: ORLANDO, FL 32837

Title: MD (X) Change ( ) Addition  
Name: RIAD, ASHRAF  
Address: 908 HORSESHOE FALLS DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: PD (X) Change ( ) Addition  
Name: ALHILAL, ADEL  
Address: 2200 WYNDAM WAY  
City-St-Zip: KISSIMMEE, FL 34743

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: MAHMOUD ELSABAGH

TD

03/05/2008

Electronic Signature of Signing Officer or Director

Date