

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008501

FILED
Jan 23, 2007
Secretary of State

Entity Name: ISLAMIC CENTER OF NAPLES, INC.

Current Principal Place of Business:

2520 DAVIS BLVD
2ND FL. UNIT E
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

2520 DAVIS BLVD
2ND FL. UNIT E
NAPLES, FL 34104

New Mailing Address:

FEI Number: 65-1082531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAGRAN, FATIH
2204 SUNSET LANE
NAPLES, FL 341044227 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: SD () Delete
Name: KUT, RASIM F
Address: 551 93RD AVE. N.
City-St-Zip: NAPLES, FL 34108

Title: TD () Delete
Name: BUTT, AVAIS D
Address: 361 PALM DR. 1
City-St-Zip: NAPLES, FL 34112

Title: P () Delete
Name: CAGRAN, FATIH
Address: 2204 SUNSET LANE
City-St-Zip: NAPLES, FL 34106

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: AVAIS BUTT

TD

01/23/2007

Electronic Signature of Signing Officer or Director

Date