

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007881

FILED
Aug 23, 2010
Secretary of State

Entity Name: ISLAMIC CENTER OF POLK COUNTY, FLA., INC.,

Current Principal Place of Business:

242 ASH LN
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

242 ASH LN
LAKELAND, FL 33813

New Mailing Address:

FEI Number: 59-3179362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, DAVID
242 ASH LN
LAKELAND, FL 33813 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: CMD
Name: ANDERSON, DAVID
Address: 242 ASH LN
City-St-Zip: LAKELAND, FL 33813

Title: SMD
Name: ESAYED, NAWAF
Address: 200 AVE K SE
City-St-Zip: WINTER HAVEN, FL 33880

Title: VCMD
Name: SAPP, WILLIAM
Address: 131 AVE T NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: TMD
Name: RASHID, FAIZ
Address: 1395 MLK BLVD
City-St-Zip: BARTOW, FL 33830

Title: MD
Name: HAMDAN, ALA'A
Address: 2606 S 4TH ST
City-St-Zip: HAINES CITY, FL 33844

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: DAVID ANDERSON

CMD

08/23/2010

Electronic Signature of Signing Officer or Director

Date