

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005465

FILED
Apr 25, 2006
Secretary of State

Entity Name: INMATE WAQF, INC.

Current Principal Place of Business:

1623 N.E. 16TH WAY
GAINESVILLE, FL 32609

New Principal Place of Business:

425 S.E. 14TH TERRACE
GAINESVILLE, FL 32641

Current Mailing Address:

1623 N.E. 16TH WAY
GAINESVILLE, FL 32609

New Mailing Address:

425 S.E. 14TH TERRACE
GAINESVILLE, FL 32641

FEI Number: 37-1450664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOHAMMED, KHALED R
1514 S.E. 15TH AVENUE
GAINESVILLE, FL 32641 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: CPD () Delete
Name: HENDERSON, WILLIAM
Address: 906 135 WAY
City-St-Zip: SUNRISE, FL 33325

Title: TD () Delete
Name: MOHAMMED, KHALED R
Address: 1514 S.E. 15TH AVENUE
City-St-Zip: GAINESVILLE, FL 32641

Title: SD () Delete
Name: ABDUL-MALIK, RUQAYYAH
Address: 415 STANTON ST
City-St-Zip: CHICAGO, IL 60466

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPTD (X) Change () Addition
Name: MOHAMMED, KHALED R
Address: 1514 S.E. 15TH AVE.
City-St-Zip: GAINESVILLE, FL 32641

Title: VPD (X) Change () Addition
Name: TYLER, ROBERT
Address: 4120 N.W. 43RD TERRACE
City-St-Zip: GAINESVILLE, FL 32606

Title: SD (X) Change () Addition
Name: ABDUL-MALIK, RUQAYYAH
Address: 1436 W. 62ND ST 2ND FLOOR
City-St-Zip: CHICAGO, IL 60636

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: KHALED R. MOHAMMED

CPTD

04/25/2006

Electronic Signature of Signing Officer or Director

Date