

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003101

FILED
Sep 01, 2006
Secretary of State

Entity Name: INTERFAITH COUNCIL OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

225 S. INTERLACHEN AVE.
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

225 S. INTERLACHEN AVE.
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-0637840 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FULWIDER, BRYAN G
225 S. INTERLACHEN AVE.
WINTER PARK, FL 32789 US

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 (X) Delete
Name: DELAHUNT, WILLIAM M REV.
Address: 1606 NEW YORK AVE.
City-St-Zip: ORLANDO, FL 32730

Title: D () Delete
Name: GEANS, GEORGE E
Address: 159 CAROLWOOD BLVD.
City-St-Zip: FERN PARK, FL 32730

Title: D () Delete
Name: WEINREICH, BARBARA
Address: 1323 ANCHOR COURT
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: KHANDELWAL, DEEN D
Address: 8610 VESTA TERRACE
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: KERMALLI, IMAM A
Address: 1973 CORPORATE SQUARE
City-St-Zip: LONGWOOD, FL 32750

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:

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: DEEN D. KHANDELWAL

D

09/01/2006

Electronic Signature of Signing Officer or Director

Date