

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 04, 2012
Secretary of State

DOCUMENT# N07000010594

Entity Name: ISLAMIC CENTER OF CLERMONT, INC.**Current Principal Place of Business:**15128 LOST LAKE ROAD
CLERMONT, FL 34711**New Principal Place of Business:****Current Mailing Address:**15128 LOST LAKE ROAD
CLERMONT, FL 34711**New Mailing Address:****FEI Number:** 20-8001856**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ANWAR LATIB
15128 LOST LAKE RD
CLERMONT, FL 34711 US**Name and Address of New Registered Agent:**MOHAMED N KHAN
15128 LOST LAKE RD
CLERMONT, FL 34711 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: MOHAMED N KHAN

10/04/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TPS
Name: KHAN, MOHAMED N
Address: 15128 LOST LAKE RD
City-St-Zip: CLERMONT, FL 34711

Title: TT
Name: SUKHRAM, IMRAAN
Address: 15128 LOST LAKE RD
City-St-Zip: CLERMONT, FL 34711

Title: TAST
Name: KHAN, BIBI N
Address: 15128 LOST LAKE RD
City-St-Zip: CLERMONT, FL 34711

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: MOHAMED N KHAN

PRES

10/04/2012

Electronic Signature of Signing Officer or Director

Date