## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000012089

FILED Mar 26, 2008 Secretary of State

Entity Name: ISLAMIC UNDERSTANDING INSTITUTE, INC.

Current Principal Place of Business: New Principal Place of Business:

2415 PARKWOOD DRIVE 2415 PARKWOOD DRIVE PANAMA CITY, FL 32405 PANAMA CITY, FL 32405

Current Mailing Address: New Mailing Address:

2415 PARKWOOD DRIVE PANAMA CITY, FL 32405

FEI Number: 37-1558924 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JINKS, RUSSELL

1904 WILSON AVENUE

PANAMA CITY, FL 32405 US

KENNETH, STEWART R C.P.A.
626 LUVERNE AVENUE
PANAMA CITY, FL 32402 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: KENNETH R. STEWART 03/26/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: ELMESKY, MEDHAT MR.

Address: 3317 JENKS AVENUE Address: 3317 JENKS AVENUE
City-St-Zip: PANAMA CITY, FL 32405
City-St-Zip: PANAMA CITY, FL 32405

Title: S () Delete Title: () Change () Addition

 Name:
 ABOULELA, ÂYMAN DR.
 Name:

 Address:
 2415 PARKWOOD DRIVE
 Address:

 City-St-Zip:
 PANAMA CITY, FL 32405
 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SHAABAN, ALY DR.
 Name:

 Address:
 1805 EAST 12TH STREET
 Address:

 City-St-Zip:
 LYNN HAVEN, FL 32444
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: AYMAN ABOULELA S 03/26/2008