

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 18, 2005  
Secretary of State**

DOCUMENT# N98000007028

Entity Name: ISLAMIC SOCIETY OF GREATER ORLANDO, INC.

**Current Principal Place of Business:**

11543 COMMERCIAL ST.  
ORLANDO, FL 32836

**New Principal Place of Business:**

**Current Mailing Address:**

3129 HEADDRESS DR.  
KISSIMMEE, FL 34746

**New Mailing Address:**

FEI Number: 59-3548478      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GASPERONI, EMIL A  
931 WEKIVA SPRINGS  
LONGWOOD, FL 32779      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: D      ( ) Delete  
Name: RASHEED, MOHAMMAD TARIQ  
Address: 3129 HEADDRESS DRIVE  
City-St-Zip: KISSIMMEE, FL 34746

Title: D      ( ) Delete  
Name: HUSSAIN, AIJAZ  
Address: 11736 REEDY CREEK DRIVE, #204  
City-St-Zip: ORLANDO, FL 32836

Title: D      ( ) Delete  
Name: JUMANI, RIYAZ  
Address: 11736 REEDY CREEK DRIVE, #204  
City-St-Zip: ORLANDO, FL 32836

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TARIQ RASHEED

D

04/18/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date