## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000005718

FILED Apr 21, 2005 Secretary of State

Entity Name: ISLAMIC CENTER OF GAINESVILLE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1010 WEST UNIVERSITY AVE. GAINESVILLE, FL 32601 **Current Mailing Address: New Mailing Address:** 1010 WEST UNIVERSITY AVE. GAINESVILLE, FL 32601 FEI Number: 59-3607185 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KHAN, HARIS 523 NW 103 TERRACE US GAINESVILLE, FL 32607 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DCH () Change () Addition () Delete KHAN HARIS CHAIR/P Name: Name: 523 NW 103 TERRACE Address: Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MEHDI, KARIM Name: Address: 110 NW 9TH TERRACE APT 101 Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: DS () Delete Title: (X) Change ( ) Addition MUJAHID, GHULAM AHMED, SHERIF TR Name: Name: 5415 NW 78TH LANE Address: Address: **HUNTERS RUN** City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32608 Title: ( ) Delete Title: () Change () Addition MUHAMMED, KHALED VC Name: Name: Address: 1514 SE 15 AVE Address: City-St-Zip: GAINESVILLE, FL 32641 City-St-Zip: Title: (X) Delete Title: () Change () Addition DEY, FAROUK SECY Name: Name: 3914 SW 26 DRIVE Address: Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: Title: () Delete Title: () Change () Addition AL-ISSA, JAMIL Name: Name: Address: 346 SW 62 BLVD Address: GAINESVILLE, FL 32607 City-St-Zip: 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: HARIS KHAN C 04/21/2005