

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733706

FILED
Mar 26, 2018
Secretary of State
CC0987476584

Entity Name: ISLAMIC SOCIETY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1089 N GOLDENROD RD
ORLANDO, FL 32807

Current Mailing Address:

PO BOX 338
GOLDENROD, FL 32733 US

FEI Number: 51-0188054

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUSRI, MUHAMMAD
1586 N. GOLDENROD RD.
ORLANDO, FL 32807 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

Officer/Director Detail :

Title PCD
Name MUSRI, MUHAMMAD PHD, IMAM
Address 1586 N. GOLDENROD RD.
City-State-Zip: ORLANDO FL 32807

Title SD
Name GIBBS, W. ERNEST PHD
Address 9574 BENNINGTON CHASE DR.
City-State-Zip: ORLANDO FL 32829

Title D
Name ALLY, MOHAMED H
Address 100 KILLINGTON WAY
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name HATIM, HAMIDULLAH IMAM
Address 400 ROCK LAKE DRIVE
City-State-Zip: ORLANDO FL 32805

Title D
Name ASSIM, MOHAMMED
Address 1210 SARAH ST.
City-State-Zip: LONGWOOD FL 32750

Title D
Name ZAMAN, AHMADI B DR.
Address 412 BARCLAY CT
City-State-Zip: ALTAMONTE SPGS FL 32701

Title DIRECTOR
Name NUR, MOHAMED IMAM
Address 10025 OAK CREST RD.
City-State-Zip: ORLANDO FL 32829

Title DIRECTOR
Name AYGUN, DAVUT IMAM
Address 9501 SATELLITE BLVD.
City-State-Zip: ORLANDO FL 32837

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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: MUHAMMAD MUSRI

PRESIDENT

03/26/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name MARDINI, WALID

Address 1830 STATE ROAD 436

City-State-Zip: WINTER PARK FL 32792