

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005987

Entity Name: THE PEACE INSTITUTE, INC.**Current Principal Place of Business:**1586 N. GOLDENROD ROAD
A
ORLANDO, FL 32807**Current Mailing Address:**P.O. BOX 338
GOLDENROD, FL 32733**FEI Number: 51-0421816****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MUSRI, MUHAMMAD
1586 N. GOLDENROD ROAD
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
Address	1586 N. GOLDENROD ROAD
City-State-Zip:	ORLANDO FL 32807

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

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

Title	DIRECTOR
Name	CHAABAN, BASSEM
Address	215 RIVERCHASE DR.
City-State-Zip:	ORLANDO FL 32807

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

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****03/15/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date