## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000600

Entity Name: THE ISLAMIC SOCIETY OF SARASOTA AND BRADENTON, INC.

FILED Feb 28, 2018 Secretary of State CC0695402953

Date

## **Current Principal Place of Business:**

4350 N. LOCKWOOD RIDGE RD. SARASOTA. FL 34234

## **Current Mailing Address:**

P.O. BOX 50294

SARASOTA, FL 34232

FEI Number: 65-0469038 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HASSAN, MAHOMED SHIRAZ 4350 N LOCKWOOD RIDGE RD SARASOTA, FL 34234 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: MAHOMED SHIRAZ HASSAN 02/28/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title SECRETARY

Name HASSAN, MAHOMED SHIRAZ Name HASSAN, HARES F
Address P.O. BOX 50294 Address P.O. BOX 50294

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SARASOTA FL 34232

Title TREASURER Title DIRECTOR

 Name
 GOMAA, IBRAHIM R
 Name
 HARAKAT, TARIK

 Address
 P.O. BOX 50294
 Address
 P.O. BOX 50294

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SARASOTA FL 34232

Title DIRECTOR Title VP

NameELBAHRI, YOUSSEFNameETYEM, TOUFICKAddress4350 N. LOCKWOOD RIDGE RD.AddressP.O. BOX 50294

City-State-Zip: SARASOTA FL 34234 City-State-Zip: SARASOTA FL 34232

Title DIRECTOR

Name AHMED, SALMAN

Address P.O. BOX 50294

City-State-Zip: SARASOTA FL 34232

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: GOMAA IBRAHIM TREASURER 02/28/2018