### 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N99000004258

## Entity Name: ISLAMIC SOCIETY OF NORTH PINELLAS, INC.

# **Current Principal Place of Business:**

1218 NEW YORK AVENUE DUNEDIN, FL 34698

# **Current Mailing Address:**

P.O. BOX 801 DUNEDIN, FL 34697

# FEI Number: 59-3586813

## Name and Address of Current Registered Agent:

ELGAYAR, EZZULDIEN 1218 NEW YORK AVENUE DUNEDIN, FL 34698 US FILED Apr 14, 2014

Secretary of State

Date

Certificate of Status Desired: No

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:

Address

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Ti	tle	T, TRUSTEE	Title	SECRETARY
Na	ame	ELSAYAD, MAMDOUH	Name	ELGAYAR, EZZULDIEN
Ac	ddress	1218 NEW YORK AVE	Address	1218 NEW YORK AVE
Ci	ity-State-Zip:	DUNEDIN FL 34698	City-State-Zip:	DUNEDIN FL 34698
Ti	tle	TREASURER	Title	TRUSTEE
Na	ame	RAMSEY, ADAM	Name	HADDABAH, MUSALLAM
Ac	ddress	1218 NEW YORK AVE	Address	1218 NEW YORK AVENUE
Ci	ity-State-Zip:	DUNEDIN FL 34698	City-State-Zip:	DUNEDIN FL 34698
Ti	tle	D	Title	VP
Na	ame	ELSHAEIR , MOHAMED	Name	BENTARGJI , ABDERAHIM
Ac	ddress	1218 NEW YORK AVENUE	Address	1218 NEW YORK AVENUE
Ci	ity-State-Zip:	DUNEDIN FL 34698	City-State-Zip:	DUNEDIN FL 34698
Ti	tle	PRESIDENT		
Na	ame	ESAQAF, ALWI		

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: EZZULDIEN ELGAYAR

City-State-Zip: DUNEDIN FL 34698

1218 NEW YORK AVENUE

SECRETARY

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date