

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 670845

**Entity Name:** PENINSULA DEVELOPMENT CORP.**Current Principal Place of Business:**C/O REGAL SECURITIES  
189 SOUTH ORANGE AVENUE SUITE 1230S  
ORLANDO, FL 32801**Current Mailing Address:**950 MILWAUKEE AVENUE  
SUITE 307  
GLENVIEW, IL 60025 US**FEI Number:** 36-3076442**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	SECRETARY
Name	BOKIOS, EUGENIA
Address	C/O REGAL SECURITIES 189 SOUTH ORANGE AVENUE SUITE 1230S
City-State-Zip:	ORLANDO FL 32801

Title	VICE PRESIDENT
Name	BOKIOS, STEVEN
Address	C/O REGAL SECURITIES 189 SOUTH ORANGE AVENUE SUITE 1230S
City-State-Zip:	ORLANDO FL 32801

Title	TREASURER
Name	CARROLL, VICTORIA
Address	C/O REGAL SECURITIES 189 SOUTH ORANGE AVENUE SUITE 1230S
City-State-Zip:	ORLANDO FL 32801

Title	PRESIDENT, DIRECTOR
Name	BOKIOS, GEORGE
Address	C/O REGAL SECURITIES 189 SOUTH ORANGE AVENUE SUITE 1230S
City-State-Zip:	ORLANDO FL 32801

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** VICTORIA CARROLL

TREASURER

04/22/2020

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date