2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003422

Apr 23, 2007 Secretary of State

Entity Name: SOUTHWEST FLORIDA GWI HOUSING XI, INC.

Current Principal Place of Business: New Principal Place of Business:

4940 BAYLINE DRIVE, N FT. MYERS, FL 33917

Current Mailing Address: New Mailing Address:

4940 BAYLINE DRIVE, N FT. MYERS, FL 33917

FEI Number: 57-1232683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIVITO, JOSEPH A ESQ. DIVITO, JOSEPH A ESQ 4514 CÉNTRAL AVENUE DIVITO & HIGHAM, P.A. 4514 CENTRAL AVENUE US ST. PETERSBURG, FL 33711

ST. PETERSBURG, FL 33711 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: 04/23/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DEVEREAUX, JEAN DEVEREAUX, JEAN Name: Name: 1434 SE 34TH STREET Address: 1435 SE 34TH STREET Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904

Title: Title: () Delete () Change () Addition

POTTORF, RAY V Name: Name: Address: 950 AQUA LANE Address: City-St-Zip: FT. MYERS, FL 33919 City-St-Zip:

Title: () Delete Title: () Change () Addition

SCHNEIDER, DALE Name: Name: 7000 BARRANCAS AVENUE Address: Address: City-St-Zip: BOKEELIA, FL 33922 City-St-Zip:

Title: () Delete Title: STD (X) Change () Addition

EVANCHYK, RICK Name: Name: HAMEL, SHARLENE 4940 BAYLINE DRIVE, N Address: Address: 1387 WALES DRIVE City-St-Zip: FT. MYERS, FL 33917 City-St-Zip: FT. MYERS, FL 33901

Title: () Delete Title: (X) Change () Addition

HAMEL, SHARLENE ADAMS, DANIEL Name: Name:

1387 WALES DRIVE 2180W FIRST ST SUITE 212 Address: Address: City-St-Zip: N. FT. MYERS, FL 33917 City-St-Zip: FT. MYERS, FL 33901

Title: () Delete Title: (X) Change () Addition HAMEL. SHARLENE HOLLAND, RAYMOND Name: Name: Address: 1387 WALES DRIVE Address: 1400 NORTH 15TH STREET FT. MYERS, FL 33901 IMMOKALEE, FL 34142

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JEAN DEVEREAUX PD 04/23/2007