

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37205

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** PENINSULA AFFORDABLE HOUSING, INC.

**Current Principal Place of Business:**

1487 SECOND STREET  
SARASOTA, FL 34236

**New Principal Place of Business:**

1487 SECOND STREET C  
SARASOTA, FL 34236

**Current Mailing Address:**

1487 SECOND STREET  
SARASOTA, FL 34236

**New Mailing Address:**

PO BOX 432  
SARASOTA, FL 34230

**FEI Number:** 59-3138292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIGA, RICHARD B  
1487 SECOND STREET  
SUITE A  
SARASOTA, FL 34236 US

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

MIGA, RICHARD B  
1487 SECOND STREET C  
SUITE A  
SARASOTA, FL 34236 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: RICHARD B MIGA

04/29/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPTD ( ) Delete  
Name: MIGA, RICHARD B  
Address: 1487 SECOND STREET  
City-St-Zip: SARASOTA, FL 34236

Title: PSD ( ) Delete  
Name: SEIVEN, BRUCE  
Address: 4021 VIA MIRADA  
City-St-Zip: SARASOTA, FL 34238

Title: D ( ) Delete  
Name: DAHLBORG, MARTIN  
Address: 5023 BARRINGTON CIR.  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: RICHARD B MIGA

MGR

04/29/2008

Electronic Signature of Signing Officer or Director

Date