FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9600006448

1. Corporation Name

PENINSULA HOUSING DEVELOPMENT INC. XII

Principal Place of Business				
1223 S W 4TH STREET				
THIRD FLOOR				
MIAMI FL 33134				
119				

Mailing Address

300 SOUTH WEST 12TH AVENUE

SUITE A MIAMI FL 33130

FILED May 06, 1999 8:00 am Secretary of State

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of Business			3. Date Incorporated or Qualifed 12/18/1996				
etc.	Suite, Apt. #, etc.	ET.	4. FEI Number 65-0721533	Applied For Not Applicable			
	City & State	5	5. Certificate of Status Desired	\$8.75 Additional Fee Required		•	
Country 25	Zip Country 29 3 3 1 3 5 30		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Name and Address of Cu	irrent Registered Agent	10. Name and Address of New Registered Agent					
DIAZ, GUARIONE M 300 S W 12TH AVENUE THIRD FLOOR MIAMI FL 33130			S.W. 4th STREET	85 Zip Code			
	Country 25 Name and Address of Co NE M I AVENUE	26 1223 SW 4TH STRE Suite, Apt. #, etc. 27 2nd floor City & State 28 MIAMI, FL 3313 Country Zip Cou 29 3 3 1 3 5 30 Name and Address of Current Registered Agent ONE M 1 AVENUE	26 1223 SW 4TH STREET Suite, Apt. #, etc. 27 2nd floor City & State 28 MIAMI, FL 33135 Country Zip Country 25 29 3 3 1 3 5 30 Name and Address of Current Registered Agent 81 Name NE M 1 AVENUE 83 2nd file 84 Street Address of Element Street	26 1223 SW 4TH STREET 12/18/1996			

Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

CICMATURE	,				1	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	egistered Agent signature re				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	DP □ DELETE	1.1 TITLE		Change	Addition	
NAME	DIAZ, GUARIONE M	1.2 NAME				
STREET ADDRESS	300 SOUTH WEST 12TH AVENUE, 3RD FLOOR	1.3 STREET ADDRESS	1223 SW 4th STREET			
CITY-ST-ZIP	MIAMI FL 33130	1.4 CITY-ST-ZIP	MIAMI, FL 33135			
TITLE	DS DELETE	2.1 TITLE	,	Y Change	☐ Addition	
NAME	BECKER, ALINA E	2.2 NAME	1000 GW 445 NVD 0-4 6100		i	
STREET ADDRESS	300 SOUTH WEST 12TH AVENUE, 3RD FLOOR	2.3 STREET ADDRESS	1223 SW 4th AVE. 2nd floor			
CITY-ST-ZIP	MIAMI FL 33130	2. 4 CITY-ST-ZIP	MIAMI, •FL 33135			
TITLE	DT DELETE	3.1 TITLE	DT	Change	Addition Addition	
NAME	GALARNES, BENIGNO	3.2 NAME	SWITZER, RAQUEL C.			
STREET ADDRESS	300 SOUTH WEST 12TH AVENUE, 3RD FLOOR	3.3 STREET ADDRESS	1390 S. DIXIE HIGHWAY #11	08	٠٠. ر	
CITY-ST-ZIP	MIAMI FL 33130	3.4. CITY-ST-ZIP	CORAL GABLES, FL 33146			
TITLE	DVP DELETE	4.1 TITLE	33140	Change	Addition Addition	
NAME	PAZOS, ANDRES	4.2 NAME				
STREET ADDRESS	300 SOUTH WEST 12TH AVENUE, 3RD FLOOR	4.3 STREET ADDRESS	1223 SW 4th STREET			
CITY-ST-ZIP	MIAMI FL 33130	4.4 CITY-ST-ZIP	MIAMI, FL 33135			
TITLE	DC DELETE	5.1 TITLE	РC	Change	☐ Addition	
NAME	BERNAL, PETER R	5.2 NAME	DE GOYTISOLO, AGUSTIN			
STREET ADDRESS	10940 SOUTH WEST 104TH AVENUE	5.3 STREET ADDRESS	1000 BRICKELL AVE., #660			
CITY-ST-ZIP	MIAMI FL 33176	5.4 CITY-ST-ZIP	MIAMI, FL 33131	<u>-</u>		
TITLE	DELETE	6.1 TITLE		Change	Addition	
NAME	,	6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				
CITY OF THE		6.4 CITY-ST-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.