

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000193

FILED
Mar 13, 2009
Secretary of State

Entity Name: PENINSULA HOUSING DEVELOPMENT INC. XIV

Current Principal Place of Business:

1223 SW 4TH STREET
2ND FLOOR
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1223 SW 4 ST
2ND FOOR
MIAMI, FL 33133

New Mailing Address:

1223 SW 4 ST
2ND FOOR
MIAMI, FL 33135

FEI Number: 65-0891227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIAZ, GUARIONE M
1223 SW4TH STREET 2ND FLOOR
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

DIAZ, GUARIONE M
1223 SW4TH STREET
2ND FLOOR
MIAMI, FL 33135 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:

03/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DIAZ, GUARIONE M
Address: 1223 SW 4 STREET
City-St-Zip: MIAMI, FL 33135

Title: SD () Delete
Name: SANTANA, CRISTINA
Address: 1223 SW 4 STREET
City-St-Zip: MIAMI, FL 33135

Title: TD () Delete
Name: SWITZER, RAQUEL C
Address: 1223 SW 4 STREET
City-St-Zip: MIAMI, FL 33135

Title: VPD () Delete
Name: PAZOS, ANDRES
Address: 1223 SW 4 STREET
City-St-Zip: MIAMI, FL 33135

Title: D () Delete
Name: ALLEN, WIFREDO
Address: 2250 SW 3 AVE #303
City-St-Zip: MIAMI, FL 33129

Title: D () Delete
Name: NAVARRO, MARTA
Address: 1223 SW 4 STREET
City-St-Zip: MIAMI, FL 33135

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:

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

Title: D (X) Change () Addition
Name: BARRETO, MARIELENA
Address: 1223 S W 4ST
City-St-Zip: MIAMI, FL 33135

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: MARTA NAVARRO

D

03/13/2009

Electronic Signature of Signing Officer or Director

Date