

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000258

Entity Name: PENINSULA HOUSING DEVELOPMENT INC. XI**Current Principal Place of Business:**1223 SW 4TH STREET
2ND FLOOR
MIAMI, FL 33135**Current Mailing Address:**1223 SW 4TH STREET
2ND FLOOR
MIAMI, FL 33135 US**FEI Number:** 65-0650918**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DIAZ, GUARIONE M
1223 SW 4TH 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title PRESIDENT, DIRECTOR
Name DIAZ, GUARIONE M
Address 1223 SW 4TH STREET
City-State-Zip: MIAMI FL 33135

Title DIRECTOR
Name CUBELA, NOEL
Address 2414 SW 19TH TERRACE
City-State-Zip: MIAMI FL 33145

Title DIRECTOR
Name NAVARRO, MARTA
Address 1223 SW 4TH STREET
City-State-Zip: MIAMI FL 33135

Title DIRECTOR
Name FERNADEZ, LUIS
Address 205 SW 23RD ROAD
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name ALLEN, WILFREDO
Address 2250 SW 3RD AVENUE
 SUITE 100
City-State-Zip: MIAMI FL 33129

Title TREASURER, DIRECTOR
Name SWITZER, RAQUEL C
Address 1360 S. DIXIE HWY
 SUITE 355
City-State-Zip: CORAL GABLES FL 33146

Title DIRECTOR
Name BARREIRO, GLADYS
Address 2235 SW 8TH STREET
 APT. 711
City-State-Zip: MIAMI FL 33135

Title DIRECTOR, SECRETARY
Name MASVIDAL, SERGIO
Address 6800 SW 80TH AVENUE
City-State-Zip: MIAMI FL 33143

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

SIGNATURE: GUARIONE M. DIAZ**PRESIDENT****02/13/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date