

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra G. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 738237

(7)

1. Corporation Name

G - I - S HOUSING, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 PM 1:43

Principal Place of Business

Mailing Address

FREEDOM VILLAGE I
7700 66TH ST. NORTH
PINELLAS PARK FL 34665
US

10596 GANDY BLVD. NORTH (33702)
P.O. BOX 14456
ST. PETERSBURG FL 33733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/02/1977	3a. Date of Last Report 03/18/1994
4. FEI Number 59-1747348	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
24	29
Country	Country
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WAITS, R. LEE
10596 GANDY BLVD. NORTH
ST. PETERSBURG FL 33733

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	BRADLEY, JAMES P	1.2 NAME	
STREET ADDRESS	4701 NORTH HIMES AVENUE	1.3 STREET ADDRESS	
CITY- ST- ZIP	TAMPA FL	1.4 CITY- ST- ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	MOORE, JADE	2.2 NAME	
STREET ADDRESS	152 8TH AVENUE S.W.	2.3 STREET ADDRESS	
CITY- ST- ZIP	LARGO FL	2.4 CITY- ST- ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	PRICE, BETTY	3.2 NAME	
STREET ADDRESS	4880 LOCUST ST. NE #327	3.3 STREET ADDRESS	
CITY- ST- ZIP	ST. PETERSBURG FL	3.4 CITY- ST- ZIP	
TITLE	STD	4.1 TITLE	☐ Change ☐ Addition
NAME	DONAHU, BARBARA A	4.2 NAME	
STREET ADDRESS	1200 7TH AVE NO	4.3 STREET ADDRESS	
CITY- ST- ZIP	ST PETERSBURG FL	4.4 CITY- ST- ZIP	
TITLE	EVP	5.1 TITLE	☐ Change ☐ Addition
NAME	R. LEE WAITS	5.2 NAME	
STREET ADDRESS	10596 GANDY BLVD.	5.3 STREET ADDRESS	
CITY- ST- ZIP	ST. PETERSBURG FL	5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 changing, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. Lee Waits

1/27/95

Date

813 576-3819 EXT 227

Telephone Number