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FILED

Apr 30 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # 738237****(7)**

1. Corporation Name

G - I - S HOUSING, INC.

Principal Place of Business

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

Mailing Address

**C/O R. LEE WAITS
P.O. BOX 14456
ST. PETERSBURG FL 33733-4456
US**3. Date Incorporated or Qualified
03/02/19773a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

4. FEI Number
59-1747348Applied For
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution**\$5.00** May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida StatutesYes ☒ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. 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 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 617.0504, Florida Statutes.

SIGNATURE **R. LEE WAITS, EXECUTIVE V. PRES.**

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

(NOTE: Registered Agent Signature required when reinstating)

4/7/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE
NAME **BRADLEY, JAMES P**
STREET ADDRESS **4701 NORTH HIMES AVENUE**
CITY-ST-ZIP **TAMPA FL**1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **DONAHU, BARBARA A**
1.3 STREET ADDRESS **1200 7th AVE NO**
1.4 CITY-ST-ZIP **ST PETERSBURG FL**TITLE **VD** ☐ DELETE
NAME **MILLS, BLAIR G**
STREET ADDRESS **2455 LAKE POINT LANE**
CITY-ST-ZIP **CLEARWATER FL**2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE **D** ☐ DELETE
NAME **PRICE, BETTY**
STREET ADDRESS **4880 LOCUST ST. NE #327**
CITY-ST-ZIP **ST. PETERSBURG FL**3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE **STD** ☐ DELETE
NAME **DONAHU, BARBARA A**
STREET ADDRESS **1200 7TH AVE NO**
CITY-ST-ZIP **ST PETERSBURG FL**4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE **EVP** ☐ DELETE
NAME **R. LEE WAITS**
STREET ADDRESS **10596 GANDY BLVD.**
CITY-ST-ZIP **ST. PETERSBURG FL**5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: **R. LEE WAITS, EXECUTIVE V. PRES.****4/7/97****813/523/1512**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0051397

CR2E037 (9/96)