

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738237

1. Entity Name

G - I - S HOUSING, INC.

FILED
May 30, 2002 8:00 am
Secretary of State

05-06-2002 90174 033 ****70.00

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

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1747348

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WAITS, R. LEE
10596 GANDY BLVD. NORTH
ST. PETERSBURG FL 33702

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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 R. LEE WAITS, President & CEO *[Signature]* 4/14/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RAULERSON, G RAYMOND 200 COUNTRY CLUB, APT 1201 LARGO FL 33771 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TANAKA, AKIKO 10900 ROOSEVELT BOULEVARD SAINT PETERSBURG FL 33716 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEL BELLO, DALE 3600 66TH ST N ST. PETERSBURG FL 33710 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP R. LEE WAITS 10596 GANDY BLVD. SAINT PETERSBURG FL 33702 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PRICE, ELIZABETH 1255 PASADENA AVENUE S., BLDG A-1215 SAINT PETERSBURG FL 33707 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FALONE, TOM IV, 300 S. DUNCAN AVE. CLEARWATER, FL 33755-6457 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUPREE HILL, CAROLYN 13575 58th ST. N., STE 200 CLEARWATER, FL 34620 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, DAN R. 5020 BAYSHORE BLVD. TAMPA, FL 33611 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIGON SMITH, L. MICHELLE 2482 PINELLAS POINT DR.S. ST. PETERSBURG, FL 33712 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMPSON, CHRISTOPHER 1200 SNELL ISLE BLVD., NE ST. PETERSBURG, FL 33704 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. LEE WAITS, President & CEO *[Signature]* 4/14/02 (727) 523-1512
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)