FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 24, 1999 8:00 am § Secretary of State

03-24-1999 90026 045 ****70.00

DOCUMENT # NOQ130

1. Corporation Name							
G-I-S HOUSING-HILLSBOROUGH, INC.							
							,
Principal Place of Business Mailing Address							
FREEDOM VILLAGE II C/O R. LEE WAITS			,		I HARISIRI AIR AARKA (BRAK IJAKA IIII) BARI AFRA	<u> </u>	
5002 S. BRIDGE ST. P.O. BOX 14456			466				
TAMPA FL 33611 ST. PETERSBURG FL 33733-4 US US			400	•) (SALLIS) BIL COLLS (STELLIGES AND SOUR STALLING	IIBII SIGII GIGII GIGI	
00							
2. Principal Pl	lace of Business	2a. Mailing Address		-	3. Date Incorporated or Qualifed		
21		26			05/07/1985		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number	 	plied For
22		27	-		59-2528701	\$8.75 A	t Applicable
City & State	e	City & State			5. Certificate of Status Desired	Fee Re	
Zip	Country		Count	 rv	6. Election Campaign Financing	\$5.00	
24	25	29 30	_	•	Trust Fund Contribution	Added to	. ,
	9. Name and Address of Current				10. Name and Address of New Registere	d Agent	
			8	1 Name			1
WAITS, R. LEE				82 Street Address (P.O. Box Number is Not Acceptable)			
10596 GANDY BLVD. NORTH							
ST PETERSBURG FL 93733 33702			8	3			1
0., 4.4.			8	4 City		85 Zip (Code
						L	
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes, f Florida, Such change was auth	the abo	ve named the corpo	proporation submits this statement for the purpose thon's board of directors. I hereby accept the app	of changing its pointment as re-	registered gistered
agent, I a	m familiar with, and accept the obligati	ons of, Section 617.0503, Florida	a Statuty	$ls \rho$	b-4		
SIGNATURE	R. Lee Waits, Pr		-(2)	<i>الكر</i> يف	2 / uired when reinstating) DATE	12/99	
12.	Signature, typed or printed name of registered agent OFFICERS ANI		13.	Jeni agriacio	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD DELETE		1.1 TITLE			Change	Addition
NAME	DONAHO, BARBARA		1.2 NAM	E			-
STREET ADDRESS		!	1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ST PETERSBURG FL 33703		1.4 CITY-ST-ZIP				
TITLE			2.1 TITLE			Change	☐ Addition
NAME	MILLS, BLAIR		2.2 NAME		2/65 Tale Deint Tana	-	
STREET ADDRESS	100 5TH AVE S		2.3 STRE	ET ADDRESS	2455 Lake Point Lane		-
CITY-ST-ZIP	ST PETERSBURG FL 33701		Z.4 Gil 1-31-Zir		Clearwater, FL 33762	Channa	Addition
TITLE '	STD	☐ DELETE 3.1) .	Change	L. Addition
NAME	DEL BELLO, DALE		3.2 NAM				
STREET ADDRESS			ı	ET ADDRESS			/
CITY-\$T-ZIP	C pereze		3.4. CITY-ST-ZIP 4.1 TITLE			Change	Addition
TITLE	VD		4.1 HILL				~
NAME	WAITS, R., LEE			ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	10596 GANDY BLVD. St. Petersburg Fl		4.4 CITY		33702		
TITLE	OI. FEIERODONG FL	☐ DELETE	5.1 TITL		STD	Change	Addition
NAME		_	5.2 NAM		Elizabeth Price		~
STREET ADDRESS			5.3 STRI	EET ADDRESS	4880 Locust St. NE #327		
CITY-ST-ZIP			5.4 CITY	- ST-ZIP	St. Petersburg, FL 33703		
TITLE		☐ DELETE	6.1 TITU	I		Change	☐ Addition
NAME	,		6.2 NAM	E		-	
STREET ADDRESS			6.3 STR	EET ADDRESS			

14. 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 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

2/12/99