

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90127 040 ****70.00

DOCUMENT # N97000006700

1. Entity Name

GIS HOUSING VI, INC.

Principal Place of Business

Mailing Address

**10596 GANDY BLVD
 ST. PETERSBURG FL 33702**

**P.O. BOX 14456
 C/O R. LEE WAITS
 ST. PETERSBURG FL 33733**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3482009

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WAITS, R. LEE
 10596 GANDY BLVD
 ST. PETERSBURG FL 33702**

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**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☐ Delete
 NAME **RAULERSON, G. RAYMOND**
 STREET ADDRESS **200 COUNTRY CLUB, APT 1201**
 CITY-ST-ZIP **LARGO FL 33771**

TITLE **PD** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **DV** ☐ Delete
 NAME **WAITS, R. LEE**
 STREET ADDRESS **10596 GANDY BLVD**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33702**

TITLE **VPD** ☐ Change ☒ Addition
 NAME **FALONE, TOM IV**
 STREET ADDRESS **CLEARWATER, FL 33755**
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **TANAKA, AKIKO**
 STREET ADDRESS **10900 ROOSEVELT BLVD**
 CITY-ST-ZIP **SAINT PETERSBURG FL 33716**

TITLE **D** ☐ Change ☒ Addition
 NAME **JOHNSON, DAN R.**
 STREET ADDRESS **5020 BAYSHORE BLVD.**
 CITY-ST-ZIP **TAMPA, FL 33611**

TITLE **D** ☐ Delete
 NAME **DEL BELLO, DALE**
 STREET ADDRESS **3600 66TH ST N.**
 CITY-ST-ZIP **ST. PETERSBURG FL 33710**

TITLE **D** ☐ Change ☒ Addition
 NAME **LIGON SMITH, L. MICHELLE**
 STREET ADDRESS **2482 PINELLAS POINT DR.S.**
 CITY-ST-ZIP **ST. PETERSBURG, FL 33712**

TITLE **D** ☒ Delete
 NAME **CARPENTER, GLEN R**
 STREET ADDRESS **2010 DEKLE AVENUE**
 CITY-ST-ZIP **TAMPA FL 33606**

TITLE **D** ☐ Change ☒ Addition
 NAME **THOMPSON, CHRISTOPHER**
 STREET ADDRESS **1200 ISLE BLVD., NE**
 CITY-ST-ZIP **ST. PETERSBURG, FL 33704**

TITLE **D** ☐ Delete
 NAME **DUPREE HILL, CAROLYN**
 STREET ADDRESS **13575 58TH ST., N. STE. 200**
 CITY-ST-ZIP **CLEARWATER FL 34620**

TITLE **STD** ☐ Change ☒ Addition
 NAME **PRICE, ELIZABETH**
 STREET ADDRESS **1255 PASADENA AVE. S. BLDG A-1215**
 CITY-ST-ZIP **SAINT PETERSBURG, FL 33704**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/02 (727) 523-1512

Date

Daytime Phone #

CR2E037 (9/01)