

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006700

FILED
Apr 09, 2009
Secretary of State

Entity Name: GIS HOUSING VI, INC.

Current Principal Place of Business:

10596 GANDY BLVD
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

C/O LEE C ZEH
10596 GANDY BLVD
ST. PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 59-3482009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOPEZ, LOUISE R
Address: 3111 W DR ML KING, JR. BLVD
City-St-Zip: TAMPA, FL 33607 US

Title: PD () Delete
Name: RUTZ, SCOTT C
Address: 425 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33602 US

Title: D () Delete
Name: GAWRYCH, KERI A
Address: 401 EAST JACKSON ST
City-St-Zip: TAMPA, FL 33602

Title: EVP () Delete
Name: WAITS, R LEE
Address: 10596 GANDY BLVD
City-St-Zip: ST PETERSBURG, FL 33702

Title: DS () Delete
Name: CERESOLI, HEATHER
Address: 450 CARILLON PKWY
City-St-Zip: ST PETERSBURG, FL 33716 US

Title: VPD () Delete
Name: FALONE, TOM IV
Address: 1220 ROGERS ST
City-St-Zip: CLEARWATER, FL 33750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEE C ZEH

CS

04/09/2009

Electronic Signature of Signing Officer or Director

Date