

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90061 008 ***150.00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT # **P22365**

1. Corporation Name
GSL REAL ESTATE CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **1220 AUGUSTA HOUSTON TX 77057**
 Mailing Address: **1220 AUGUSTA HOUSTON TX 77057**

3. Date Incorporated or Qualified: **12/30/1988**
 4. FEI Number: **76-0260735**
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: **21**
 2a. Mailing Address: **26**
 Suite, Apt. #, etc.: **22**
 City & State: **23**
 Zip: **24** Country: **25**
 Suite, Apt. #, etc.: **27**
 City & State: **28**
 Zip: **29** Country: **30**

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	PARKER, ROBERT F.	
STREET ADDRESS	1220 AUGUSTA	
CITY-ST-ZIP	HOUSTON TX	
TITLE	S	<input type="checkbox"/> DELETE
NAME	WISE, RHONDA C	
STREET ADDRESS	1220 AUGUSTA	
CITY-ST-ZIP	HOUSTON TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CONDREY, WILLIAM V.	
STREET ADDRESS	1220 AUGUSTA	
CITY-ST-ZIP	HOUSTON TX 77057	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	NIESER, JOHN R	
STREET ADDRESS	1220 AUGUSTA	
CITY-ST-ZIP	HOUSTON TX 77057	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SVP/T
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	SVP KERI CURTIS
5.3 STREET ADDRESS	1220 AUGUSTA
5.4 CITY-ST-ZIP	Houston, Texas 77057
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 607, 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.

SIGNATURE: John R. Nieser **JOHN R. NIESER** Date: **1.15.99** (713) 787-3106
 Signature and typed or printed name of signing officer or director Daytime Phone #

CR2E034 (11/98)