FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP

Typed or Printed Name of General Partner Signing Form

ANNUAL REPORT 1999	Sandra B. I	of State		
1. Name of Limited Pannership	1a. DOCUMENT #			
A9800002440				
BASIN DEVELOPMENTS PARTNERSHIP, LTD.			800002 -12/08, *****57	/9801025003 26.25 ****\$26.25
Mailing Address 105 SARASOTA QUAY SARASOTA, FLORIDA 34236	Principal Office Address 105 SARASOTA QUAY SARASOTA, FLORIDA 34236		3. Date Formed or Registered JUNE 1, 1998 3a. Date of Last Report N/A	5a. Capital Contributions as Shown on record. \$10,000,000.00 5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation FLORIDA	to date: \$1,417,049.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		52-2127921 7. Certificate of Status Desired	Not Applicable \$8.75 Additional
Zip Country	Zip Country		7	Fee Required State (See reverse side for fee information)
		<u> </u>	23 35 25	
9. Name and Address of Current Registered Agent		Name		Aggregometry 1
REEMARK FLORIDA MANAGEMENT, INC.		THE BASIN CORPORATION Street Address (P.O. Box Number Is Not Acceptable)		
105 SARASOTA QUAY		2811 NORTHWOOD WAY Suite, Apt, #, etc.		
SARASOTA, FLORIDA				Zip Code
A236 City SA		SARASOT	Α	37-236
Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. THE BASIN_CORPORATION				
SIGNATURE (Registered Agent Accepting Appointment) Per: A.S.O. DATE 12/3/99				
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.				
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner 11b.	City, State & Zip Code	11c. Registration/ Document Number
THE BASIN CORPORATION			ASOTA, FLORIDA 36	P98000089763
•				
•				
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				
1. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.				
SIGNATURE DATE 12/3/98				

THE BASIN CORPORATION

Daytime Telephone Number 941 957 8120

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham