

2002 UNIFORM BUSINESS REPORT (UBR)

0625703 AV

DOCUMENT # P98000089763

1. Entity Name

THE BASIN CORPORATION

Principal Place of Business

8001 DESOTO WOODS DR
SARASOTA FL 34234

Mailing Address

8001 DESOTO WOODS DR
SARASOTA FL 34234

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

HEAD, JOHN V
209 EAST RIDGEWOOD STREET
SARASOTA FL 32801

7. Name and Address of New Registered Agent

Name
UCC Filing & Search Services Inc.
Street Address (P.O. Box Number is Not Acceptable)
526 East Park Avenue
City Tallahassee FL Zip Code 32301

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 *Alison Hand*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

ASST secy

4/15/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME FENTON, SHELDON C
STREET ADDRESS 149 DUNVEGAN ROAD
CITY-ST-ZIP TORONTO, ONTARIO, CANADA ☐ Delete

TITLE SRV
NAME FENTON, BRIAN S
STREET ADDRESS 586 CASTLEFIELD AVENUE
CITY-ST-ZIP TORONTO, ONTARIO, CANADA ☐ Delete

TITLE V
NAME TAYLOR, JEFFREY A
STREET ADDRESS 43 RANDOLPH RD
CITY-ST-ZIP TORONTO, ONTARIO, CANADA ☒ Delete

TITLE DCS
NAME HEAD, JOHN V
STREET ADDRESS 209 EAST RIDGEWOOD STREET
CITY-ST-ZIP ORLANDO FL 32801 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
200005350362--7
-04/26/02--01012--011
****150.00 ****150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DCS
NAME Rene Gareau
STREET ADDRESS 603 Sarasota Quay
CITY-ST-ZIP Sarasota, Florida 34236 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *René A. Gareau*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 12/02
Date

Daytime Phone #

FILED

02 APR 15 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)