

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000105325

1. Entity Name

AIR RIGHTS DEVELOPMENT OF SARASOTA, INC.

**FILED**  
**Apr 27, 2001 8:00 am**  
**Secretary of State**

04-27-2001 90334 013 \*\*\*150.00

Principal Place of Business

8001 DESOTO WOODS DR.  
SARASOTA FL 34243

Mailing Address

8001 DESOTO WOODS DR.  
SARASOTA FL 34243

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 **52-2141750**

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

GAREAU, RENE A  
4273 BOCA POINTE DRIVE  
SARASOTA FL 34236

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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 PD  
NAME FENTON, SHELDON C  
STREET ADDRESS 149 DUNVEGAN ROAD  
CITY-ST-ZIP TORONTO ONTARIO M5P 2N8 ☐ Delete

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

TITLE CSD  
NAME GAREAU, RENE A  
STREET ADDRESS 4273 BOCA POINT DRIVE  
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP SARASOTA, FL 34238 ☒ Change ☐ Addition

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP TORONTO-ONTARIO-CANADA-M4G 3R8 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-2-01

941-957-0120

CR2E034 (10/00)

0416045