

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000105325

FILED
Jan 12, 2006
Secretary of State

Entity Name: AIR RIGHTS DEVELOPMENT OF SARASOTA, INC.

Current Principal Place of Business:

8001 DESOTO WOODS DRIVE
SARASOTA, FL 34243 US

New Principal Place of Business:

Current Mailing Address:

8001 DESOTO WOODS DRIVE
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 52-2141750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UCC FILING & SEARCH SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FENTON, SHELDON C MR.
Address: 149 DUNVEGAN ROAD
City-St-Zip: TORONTO, ON M5P 2N8 CA

Title: SRV () Delete
Name: FENTON, BRIAN S MR.
Address: 586 CASTLEFIELD AVENUE
City-St-Zip: TORONTO, ON M5N 1L8 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHELDON C. FENTON

PRES

01/12/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date