

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 22, 2002 8:00 am**  
**Secretary of State**

04-22-2002 90157 037 \*\*\*\*50.00

**DOCUMENT # Z00295**

1. Entity Name  
**TORONTO STORAGE GROUP, L.C.**

Principal Place of Business  
**2106 BISPHAM ROAD, SUITE B**  
**SARASOTA FL 34231**

Mailing Address  
**2106 BISPHAM ROAD, SUITE B**  
**SARASOTA FL 34231**

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 **65-0216281**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PATTERSON, JOHN**  
**46 NORTH WASHINGTON BLVD.**  
**SUITE 1**  
**SARASOTA FL 34236**

Name

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

City

**FL**

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

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **M** ☐ Delete  
 NAME **891157 ONTARIO, INC.**  
 STREET ADDRESS **78 QUEENSTON RD**  
 CITY-ST-ZIP **HAMILTON, ONTARIO**

TITLE **M** ☐ Change ☒ Addition  
 NAME **Endiang Holdings Inc**  
 STREET ADDRESS **158 Warren Rd**  
 CITY-ST-ZIP **Toronto, Ontario, Canada**

TITLE **M** ☒ Delete  
 NAME **RYDER INVESTMENTS LTD.**  
 STREET ADDRESS **360 EVANS AVE**  
 CITY-ST-ZIP **ETOBICOKE, ONTARIO**

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

TITLE **M** ☐ Delete  
 NAME **LOUGHEED, RONALD S.**  
 STREET ADDRESS **44 BLUERIDGE RD**  
 CITY-ST-ZIP **WILLOWDALE, ONTARIO**

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

TITLE **M** ☒ Delete  
 NAME **SACKVILLE HOLDINGS INC.**  
 STREET ADDRESS **21 ORMSBY CRESCENT**  
 CITY-ST-ZIP **TORONTO, ONTARIO**

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

TITLE **M** ☐ Delete  
 NAME **ONTARIO 994362 LTD**  
 STREET ADDRESS **60 LAURENTIDE DRIVE**  
 CITY-ST-ZIP **DON MILLS, ONTARIO**

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

TITLE **M** ☐ Delete  
 NAME **FARRELL, JERRY H.**  
 STREET ADDRESS **1800 181 BAY ST. BCE PLACE**  
 CITY-ST-ZIP **TORONTO, ONTARIO**

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)