

6/11/02

CORPORATE DETAIL RECORD SCREEN

11:08 AM

NUM: 95000000822 ST:FL ACTIVE/FL LP FLD: 05/31/1995

LAST: CONTRIBUTION CHANGE FLD: 11/20/1995

ACT CONT: 210,301.40 FEI#: 59-3318799

NAME : LAKESIDE MEDICAL LIMITED PARTNERSHIP

PRINCIPAL: 1879 NIGHTINGALE LANE, B6

CHANGED: 10/02/96

ADDRESS TAVARES, FL 32778

RA NAME : CAMPIONE, DAVID M

RA ADDR : 600 JENNINGS AVE.

EUSTIS, FL 32726 US

ANN REP : (1999) I 03/15/99 (2000) I 02/22/00 (2001) I 10/22/01

A95000000822

1. MENU, 3. PARTNERS, 4. EVENTS

ENTER SELECTION AND CR:

800005976358--3

-06/25/02--01014--024

****148.06 ****148.06

02 JUN 25 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

62502

FF \$148.06



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

June 13, 2002

LAKESIDE MEDICAL LIMITED PARTNERSHIP
1879 NIGHTINGALE LANE, B6
TAVARES, FL 32778

SUBJECT: LAKESIDE MEDICAL LIMITED PARTNERSHIP
Ref. Number: A95000000822

We have received your document for LAKESIDE MEDICAL LIMITED PARTNERSHIP, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$148.06.

The fee to file the supplemental affidavit is \$148.06.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley
Document Specialist

Letter Number: 902A00038759

02 JUN 25 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of _____

Lakeside Medical Limited Partnership, a

Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 231,453⁰⁰.

This 3 day of June, 2002.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.

General Partner(s)

Lakeside Medical Ventures, Inc.
By: [Signature]
Richard Bosshardt, Pres.

Fees:
\$7 per \$1000, based on additional contributions
Minimum \$ 52.50
Maximum \$1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

02 JUN 25 PM 4:07
AFFIDAVIT
AND
FILED
CLERK OF COURT
TALLAHASSEE, FLORIDA