

2002 UNIFORM BUSINESS REPORT (UBR)

0015308 AT

CR2E003 (9/01)

DOCUMENT # **A99000000060**

1. Entity Name

LAKESIDE MHP, LTD.

FILED
02 APR 29 PM 5:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

**5306 CORTEZ ROAD W., SUITE FOUR
BRADENTON FL 34210**

Mailing Address

**5306 CORTEZ ROAD W., SUITE FOUR
BRADENTON FL 34210**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0885498

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DUE BY MAY 1, 2002

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOWELL, ERIC D
5306 CORTEZ ROAD W., SUITE FOUR
BRADENTON FL 34210**

Name

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

City

FL

Zip Code

8. The above named agent is 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.

DATE

9. Capital Contributions as Shown on record.

\$270,000.00

10. Amount of Capital Contributions in FLORIDA to date.

\$ 270,000.00

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **P94000050754**
NAME **MIDWAY PARTNERS, INC.**
STREET ADDRESS **5306 CORTEZ ROAD W., SUITE FOUR**
CITY-ST-ZIP **BRADENTON FL 34210**

STREET ADDRESS

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14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

REQUIRED

4/26/2002

941-794-3262

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #