

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # A02000000394

1. Entity Name
GOLDING UNITED FISHHAWK II, LTD.



Principal Place of Business
**27001 U.S. HIGHWAY 19, SUITE 2095
CLEARWATER, FL 33761**

Mailing Address
**27001 U.S. HIGHWAY 19, SUITE 2095
CLEARWATER, FL 33761**



03092008 No Chg-LP

CR2E003 (1/1/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
57-1159763

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GOLDING UNITED FISHHAWK II, INC.
27001 U.S. HIGHWAY 19, SUITE 2095
CLEARWATER, FL 33761**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

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

DOCUMENT # **P02000029850**
NAME **GOLDING UNITED FISHHAWK II, INC.**
STREET ADDRESS **27001 U.S. HIGHWAY 19, SUITE 2095**
CITY-ST-ZIP **CLEARWATER, FL 33761**

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04/22/06-80032-013 508.75

**DO NOT WRITE
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Loren M Pollack* **Loren M Pollack** **3/23/06** **727 796-1077**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE