

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAR 10 AM 10:51

DOCUMENT # A19722

1. Entity Name
UMATILLA, LTD.



Principal Place of Business

516 LAKEVIEW ROAD
UNIT 8
CLEARWATER, FL 33756

Mailing Address

516 LAKEVIEW ROAD
UNIT 8
CLEARWATER, FL 33756

DO NOT WRITE IN THIS SPACE

01172006 No Chg-LP

CR2E003 (11/05)

4. FEI Number

-59-3530316

59-2520316

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLYNN, THOMAS F
516 LAKEVIEW ROAD UNIT 8
CLEARWATER, FL 33756

**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 # L02000010824
NAME PEARL LANE, LLC
STREET ADDRESS 516 LAKEVIEW ROAD, UNIT 8
CITY- ST- ZIP CLEARWATER, FL 33756

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CITY- ST- ZIP

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000068099820
03/20/06--01017--019 **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:

**As Vice-President of
LLC General Partner**

02/15/2006

727-449-1182

SIGNATURE AND TYPED OR PRINTED NAME

Date

Daytime Phone #

STAPLE CHECK HERE