

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A31136

**FILED**  
**Apr 06, 2009**  
**Secretary of State**

**Entity Name:** ATRIUM ASSOCIATES OF PINELLAS, LTD.

**Current Principal Place of Business:**

2915 SR 590  
SUITE 21  
CLEARWATER, FL 33759

**New Principal Place of Business:**

**Current Mailing Address:**

2915 SR 590  
SUITE 21  
CLEARWATER, FL 33759

**New Mailing Address:**

**FEI Number:** 59-3050319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

QUEEN, GARY F  
2915 SR 590  
SUITE 21  
CLEARWATER, FL 33759 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P13599  
Name: NORTHERN SALINE, INC.  
Address: 26657 WOODWARD AVE., STE. 100  
City-St-Zip: HUNTINGTON WOODS, MI 48070  
Document #:  
Name: ROGAL, RAYMOND J.  
Address: 790 W. LINCOLN  
City-St-Zip: BIRMINGHAM, MI 48009  
Document #:  
Name: QUEEN, GARY F TRUSTEE  
Address: 2915 SR 590, SUITE 21  
City-St-Zip: CLEARWATER, FL 33759

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:  
  
Address:  
City-St-Zip:  
  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: GARY F. QUEEN

TRUS

04/06/2009

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date