## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

## **FILED** Anr 24. 2006 08:00 AN

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1. Entity Nam	MENT #B0100000 AWK UTA, L.P.	0048			Secre	etary of State
Principal Place of Business 100 NORTH LASALLE STREET, SUITE 910 CHICAGO, IL 60602  Mailing Address 100 NORTH LASALLE STREE CHICAGO, IL 60602  CHICAGO, IL 60602			ET, SUITE 910	1 (TERLING 1871) NEWER 11011 WERLD W		
			· · · · · · · · · · · · · · · · · · ·	04182006 No Ci		R2E003 (11/05)
D	O NOT WRIT	ACE	FEI Number     36-4423339     Certificate of State		Applied For Not Applicable	
<del></del>	6. Name and Address of Currer	nt Registered Agent		<u> </u>		
RICHMAN, MARC 5037 WESLEY DR TAMPA, FL 33647					OT WRI	
the obligati	named entity submits this statement ions of registered agent.		stered office or register	ed agent, or both, in th	ne State of Florida.	I am familiar with, and accept
Signature, typed or printed name of registered agent and site if applicable						DATE
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00						
	A GENERAL PARTNER NOTE: General Partners N	THAT IS A BUSINESS ENTIT IAY NOT be changed on the f	Y MUST BE REGIST orm; an amendmer	TERED AND ACTIV it must be filed to d	'E WITH THIS O change a gener	FFICE. al partner.
12.		ER INFORMATION			-	
DOCUMENT # NAME STREET ADDRESS	F01000000767 BLACKHAWK UTA, INC. 100 NORTH LASALLE STREE	r, suite 910			U000009	531629
CITY-ST-ZIP  DOCUMENT #  NAME  STREET ADDRESS  CITY-ST-ZIP	CHICAGO, IL 60602			*	)5/06/08-{	80045-022 500.OC
DOCUMENT # NAME STREET ADDRESS CITY-SY-ZIP DOCUMENT #			DO NOT WRITE IN THIS SPACE			
NAME STREET ADDRESS CITY-ST-ZIP				** * * * * * * * * * * * * * * * * * * *		- <del></del>

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

Blackhawk UTA, Inc. Manager

Gary S. Richman, President

(312) 580-9090

SIGNATURE:

STAPLE CHECK HERE

DOCUMENT # NAME STREET ADDRESS CHTY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

4/19/06

(312) 580-9090

Date

Daytime Phone #