

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 25 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04102007 Chg-LP CR2E003 (12/06)

DOCUMENT # B01000000048 1. Entity Name BLACKHAWK UTA, L.P.					
Principal Place of Business 100 NORTH LASALLE STREET, SUITE 910 CHICAGO, IL 60602			Mailing Address 100 NORTH LASALLE STREET, SUITE 910 CHICAGO, IL 60602		
2. Principal Place of Business - No P.O. Box # 100 N. LASALLE STREET		3. Mailing Address 100 N. LASALLE STREET			
Suite, Apt. #, etc. SUITE 2200		Suite, Apt. #, etc. SUITE 2200			
City & State CHICAGO, IL		City & State CHICAGO, IL			
Zip 60602	Country	Zip 60602	Country	4. FEI Number 36-4423339	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent RICHMAN, MARC 5037 WESLEY DR TAMPA, FL 33647			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$500.00 After May 1, 2007, 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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	F01000000767		STREET ADDRESS	100 N. LASALLE ST., SUITE 2200	
NAME	BLACKHAWK UTA, INC.		CITY - ST - ZIP	CHICAGO, IL 60602	
STREET ADDRESS	100 NORTH LASALLE STREET, SUITE 910		000101618670 05/04/07--01053--016 **500.00		
CITY - ST - ZIP	CHICAGO, IL 60602				
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CITY - ST - ZIP					
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			4/13/07 (312) 580-9090		
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date Daytime Phone #		

STAPLE CHECK HERE