2006 LIMITED PARTNERSHIP ANNUAL REPORT

FILED Mar 21, 2006 08:00 Al Secretary of State

42.0		
DOCUMENT #B0200000162 1. Entity Name NORTHGATE LAKES PARKING LIMITED PARTNERSHIP		Secretary of Star
Principal Place of Business 3890 WEST NORTHWEST HIGHWAY, SUITE 700 DALLAS, TX 75220 Mailing Address 3890 WEST NORTHWEST HIGH DALLAS, TX 75220	IWAY, SUITE 700	
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		02152006 No Chg-LP CR2E003 (11/05)
DO NOT WRITE IN THIS SPACE		4. FEI Number Applied For NOT APPLICABLE Not Applied
		5. Certificate of Status Desired \$8.75 Additional Fee Required
Name and Address of Current Registered Agent	1	<u> </u>
CAPITOL CORPORATE SERVICES, INC. 1333 NORTH DUVAL STREET TALLAHASSEE, FL 32303		DO NOT WRITE IN THIS SPACE
The above named entity submits this statement for the purpose of changing its register	ed office or register	ed agent or both in the State of Florida. Lam familiar with and accept
the obligations of registered agent.		our agoing of society in any state of contract, family and cooling
SIGNATURE	· · · · · · · · · · · · · · · · · · ·	
Signature, typed or printed name of registered agent and title if applicable		DATE : S = _
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
A GENERAL PARTNER THAT IS A BUSINESS ENTITY M NOTE: General Partners MAY NOT be changed on the form	IUST BE REGIST	ERED AND ACTIVE WITH THIS OFFICE.
12. GENERAL PARTNER INFORMATION	· · · · · · · · · · · · · · · · · · ·	The state of the s
DOCUMENT * M02000001180		
NAME UHC GP, LLC STREET ADDRESS 3890 WEST NORTHWEST HIGHWAY, SUITE 700		

CiTY-ST-ZIP DALLAS, TX 75220 **BOCUMENT #** STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY -ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT# HAME STREET ADDRESS CITY-ST-ZIP

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

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STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/15/06

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