FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

DIVISION OF C	EO Y OF ORP(STA	ATE Tinus
97 JAN 16			

1. Name of Limited Partnership

DOCUMENT # 1a. A96000002282

	A30000002202				
ECOVENTURE WGV 15, LTD.			001/23		
Mailing Address	Principal Office Address	,	3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
601 Bayshore Blvd. Suite 960 Tampa, FL 33606	601 Bayshore Bl Suite 960 Tämpa, FL 3360		12/11/96 3a. Date of Last Report	\$2. 00	
14Mpa, 11 33000	mampa, rn 3300	0		5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
			Florida	\$1.00	
Suite, Apt #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired		
Zip Country	Zip	Country	* Certificate of Status Desired	\$8.75 Additional Fee Required	
		41-2-2	8, Make check payable to: Dept. of	State (See reverse side for fee information)	
9. Name and Address of Curr	ent Registered Agent		10. If changed, new Registerer	d Agent/Office	
Name					
Edward R. Oelschlaeger 601 Bayshore Blvd. Suite 960 Tampa, Florida 33606		Street Address (P.O. Box Number Is Not Acceptable)			
		Suite, Apt. #, etc.			
		City		FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obligations of the control	or registered agent, or both, in the State of	amed limited partnership i Florida. Such change wa	organized or registered under the laws of the saws of the saws of the saw of	ne State of Florida, submits this statement aby accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)			DATE		
A GENERAL PARTNER THA	AT IS A CORPORATION IST BE REGISTERED A	, LIMITED PA IND ACTIVE V	RTNERSHIP OR OTHE VITH THIS OFFICE.	R BUSINESS ENTITY	

Address of Each General Partner

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11. Name(s) of General Partner(s)	[Do NOT Use Post Office Box Numbers]	11D. City, state & Zip Code	Document Number
Ecoventure WGV 15, Inc.	601 Bayshore Blvd. Suite 960	Tampa, FL 33606	P96000100105
			20669503 24/9701008017 191.25 ****191.25
		न गःत्रः क	191.60 ****131.60

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119-07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as

Typed or Printed Name of General Partner Signing Form Edward R. Oelschlaeger, Pres

General Partner

City Carte & Tin Corte

Daytime Telephone Number __813/251

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Registration/

CR2E003 (6/96)