## FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



WINTER GARDEN VILLAGE APARTMENTS, LTD.

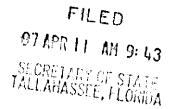
FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A07310** 





Mailing Address  2431 ALOMA AVENUE  WINTER PARK FL 32782	Principal Office Address 2431 ALOMA AVENUE WINTER PARK FL 32782		3. Date Formed or Registered     03/08/1979      3a. Date of Last Report     04/09/1996      4. State or Country of Formation	58. Capital Contributions as Shown on record. \$472,646.00  5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address	s	FL.	- 0 -		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-1931823	Applied For		
City & State	City & State		7. Certificate of Status Desired	Not Applicable  \$8.75 Additional Fee Required		
Zip Country	Zip	Country	8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address	of Current Registered Agent	10, If changed, new Registered Agent/Office				
HELLING, DALE D. 2431 ALOMA AVENUE WINTER PARK FL 32792		Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.				
		City	Marie	FL Zip Code		
the purpose of changing its registered of	20.1051 and 620.192, Florida Statutes, the above- ffice or registered agent, or both, in the State of Fl fions of section 620.192, Florida Statutes.	named limited partnership o orida. Such change was aut	rganized or registered under the laws of th orized by its general partner(s). I hereby a	e State of Florida, submits this statement fo accept the appointment of registered agent.		
SIGNATURE (Registered Agent Accepting Appo		DATE				

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), Fiorida 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 required by chapter 620, Fiorida Statutes.

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Dale D. Helling, General Partner

DATE 3/14/97

Deutime Telenhone Number

(407) 678-1106

Typed or Printed Name of General Partner Signing Form

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