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

LIMITED PARTNERSHIP ANNUAL REPORT

1997



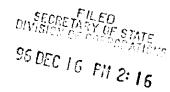
FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A32074





ELL-CAP/DIVERSIFIED 76 ASSOCIATES, AN OREGO TED PARTNERSHIP			TIM I TOTAL MARKING TIME ONLY ON THE BUR BUR ONLY ONLY ONLY ONLY		
			0012/18		
failing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
SOSS SOUTH INVEST MASADAM: SUITE 200	SEED SOUTHWEST MAGADAM, SUITE 200 PORTLAND OR 57201		10/08/1991 3a. Date of Last Report	\$3,914,000.00	
PORTLAND-OR-87901					
			11/01/1995	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address	· - ···	4. State or Country of Formation	to date	
33 n. Laiden St	33 n. Har	33 n. Marden St		3,914,000	
Srita Apt. #, etc. # 750	Suite, Apt. #, etc.	Suite, Apt. #, etc. # 950		Applied For	
City & State	City & State	City & State		Not Applicable	
Clearwater, 71 Zip Country	Clearwater	7/ Country	7. Certificate of Status Desired \$8.75 Additions Fee Required		
34615 USA	,	SA	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 Register	and Agont/Other	
· · · · · · · · · · · · · · · · · · ·		Name	TO. Il Changed, New Negister	ed Agentonice	
EASTMAN, DAVID PARKER, SKELDING, LABASKY & CARRY 318 NORTH MONROE TALLAHASSEE FL 32301		Street Address (P.O. Box Number Is Not Acceptable)			
		Suite, Apl. #, etc			
		City FL Zip Code			
Questions of 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 provision of	or registered agent, or both, in the State of F ions of section 620.192, Florida Statutes.	med limited partnership Torida Such change wa	organized or registered under the laws of is authorized by its general partner(s). The DATI	ereby accept the appointment of register	
A GENERAL PARTNER THA	ST BE REGISTERED AI	ND ACTIVE V	RTNERSHIP OR OTHI WITH THIS OFFICE.	ER BUSINESS ENTIT	
Name(s) of General Partner(s)	11a. (Do NOT Use Post Office	eral Partner Box Numbers) 11		11c. Registration/ Document Number	
ELLENBURG CAPITAL CORP.	33 n. Larden	J#950	Cleamate, 7/3	9675 P20909	
	33 N.Garden,#9	50 c1	earwater,FL 3461		
ELLENBURG, GERALD D.	5550 S.W. MAGADAM	, # 2	PORTLAND OR		
DIVERSIFIED PARTNERS,INC	4910 MASS. AVE., # 2	:19	WASHINGTON DC	P35023	
	33 n. Garden	,* 1 950	Cleanvalu, 71		
•			³⁴⁶ /50000);	2034545! 2034545013	

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 filing 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 required by chapter 620. Florida Statutes

Ellenburg Capital Corporation, General Partner

By:

DATE

DATE

DATE

DATE

Typed or Printed Name of General Partner Signing Form

Donna G. Schneider, its Secretary (503) 257-2600

***1170.00