


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 DEC 28 AM 9:48	
1. Name of Limited Partnership GAS CONSULTING, LTD		1a. DOCUMENT # A94000000039		5a. Capital Contributions as Shown on record. ZERO 5b. Amount of Capital Contributions in FLORIDA to date: ZERO	
Mailing Address Principal Office Address		3. Date Formed or Registered 12/29/93			
2. Mailing Address P.O. BOX 1600 Suite, Apt. #, etc.		3a. Date of Last Report 05/01/98			
City & State LEBANON, MO Zip Country 65536 USA		4. State or Country of Formation FLORIDA			
2a. Principal Office Address 200 EAST HIGHWAY 32 Suite, Apt. #, etc.		6. FEI Number 65-0459914		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State LEBANON, MO Zip Country 65536 USA		7. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
		8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current Registered Agent BUCHBINDER & ELEGANT PA 46 SW 1ST STREET SUITE 400 MIAMI, FL 33130				10. If changed, new Registered Agent/Office Name 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 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____					
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
11. Name(s) of General Partner(s)		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11b. City, State & Zip Code	
EVERGREEN ENERGY CORPORATION		200 E. HWY 32		LEBANON, MO 65536	
				11c. Registration/ Document Number L36575	
				000002740870--7 -01/14/99--01008--017 ***141.25 ***141.25	
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.					
SIGNATURE <u>Larry Weis</u> DATE <u>12/21/98</u>					
Typed or Printed Name of General Partner Signing Form <u>LARRY WEIS</u> Daytime Telephone Number <u>417-533-3007</u>					

CR2E003 (8/98)