

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership Ecoventure Associates I, Ltd.		1a. DOCUMENT # A98000002084	
Mailing Address 601 Bayshore Boulevard Suite 960 Tampa, FL 33606		Principal Office Address 601 Bayshore Boulevard Suite 960 Tampa, FL 33606	
2. Mailing Address Suite, Apt #, etc. City & State Zip		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip	
3. Date Formed or Registered 9-9-98		3a. Date of Last Report	
4. State or Country of Formation Florida		5a. Capital Contributions as Shown on record \$1.00	
6. FEI Number 59-3536487		5b. Amount of Capital Contributions in FLORIDA to date: \$1.00	
7. Certificate of Status Desired <input type="checkbox"/>		8. Make check payable to: Dept. of State (see reverse side for fee information)	
9. Name and Address of Current Registered Agent Edward R. Oelschlaeger 601 Bayshore Boulevard Suite 960 Tampa, FL 33606		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	11c. Registration/Document Number
Ecoventure Residences I, Inc.	601 Bayshore Boulevard Suite 960	Tampa, FL 33606	P98000077738
700002699487--4 -12/01/98--01082--020 ****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 Edward R. Oelschlaeger, President of		DATE 10-22-98	
Typed or Printed Name of General Partner Signing Form Ecoventure Residences I, Inc.		Daytime Telephone Number (813) 251-4868	