

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 APR 23 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **688827** (5)
1. Corporation Name
TWC INVESTMENT COMPANY

Principal Place of Business Mailing Address
6200 COURTNEY CAMPBELL CAUSEWAY SUITE 600 TAMPA FL 33607 **6200 COURTNEY CAMPBELL CAUSEWAY SUITE 600 TAMPA FL 33607**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/24/1980
4. FEI Number
59-2026256 Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
WILSON, JACK
6200 COURTNEY CAMPBELL CAUSEWAY
SUITE 600
TAMPA FL 33607

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Permitted)
100002501894
-04/27/98-01133-029
83 ******150.00 ****150.00**
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE VS DELETE
NAME **KOEHLER, DEBRA F.**
STREET ADDRESS **6200 COURTNEY CAMPBELL CAUSEWAY, #600**
CITY-ST-ZIP **TAMPA FL**
TITLE DPT DELETE
NAME **WILSON, JACK**
STREET ADDRESS **6200 COURTNEY CAMPBELL**
CITY-ST-ZIP **TAMPA, FL 00000**
TITLE S DELETE
NAME **MITCHELL, STEPHEN J.**
STREET ADDRESS **ONE TAMPA CITY CENTER**
CITY-ST-ZIP **TAMPA FL**
TITLE V DELETE
NAME **WELCH, GARY E**
STREET ADDRESS **6200 COURTNEY CAMPBELL CAUSEWAY, #600**
CITY-ST-ZIP **TAMPA FL**
TITLE V DELETE
NAME **BOWERS, CHRISTOPHER G**
STREET ADDRESS **6200 COURTNEY CAMPBELL CAUSEWAY, #600**
CITY-ST-ZIP **TAMPA FL**
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Debra F. Koehler
Senior Vice President

(917) 251-8888

CR2E034 (10/97)