2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #	A0000001937
DOCUMENT #	

1. Entity Name TWC TWENTY-TWO, LTD.



Principal Place of Business 655 NORTH FRANKLIN STREET. SUITE 2200

Mailing Address 655 NORTH FRANKLIN STREET. SUITE 2200

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SECRETARY OF STATE TALLAHASSEE FLORIDA

TAMPA FL 336	602		TAMPA FL 33602) I mariok nom addir olik arkik arkik arkik oliki oliki andik antidi kade nomo kikil sede kebi		
2. Principal F	Place of Busin	ess	3. Mailing Address	<u></u>	4/2		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.		DUE BY MAY 1, 2003		
City & Stat	te		City & State	· · · · · · · · · · · · · · · · · · ·	4. FEI Number 59-3687111 Applied For Not Applicable		
Zip		Country	Zip	Country	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required		
	6. Name	and Address of Current	Registered Agent		7. Name and Address of New Registered Agent		
MCDONOUGH, BRIAN J		Name Street Addit					
2200 MUS	2200 MUSEUM TOWER		Sifeet Addi	Street Address (P.O. Box Number is Not Acceptable)			
150 WEST MIAMI FL	T FLAGLER 33130	STREET					
]				City	FL Zip Code		
	named entity tions of regist		r the purpose of changing it	s registered office or rec	gistered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typed	or printed name of registered agent a	and title if applicable.		DATE		
9. Capital Co as Shown		\$50.00	10. Amount of Cap in FLORIDA to		11. MAXE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION		
	A C	SENERAL PARTNER T	HAT IS A BUSINESS EI	NTITY MUST BE RE	GISTERED AND ACTIVE WITH THIS OFFICE.		
12.	NOTE	GENERAL PARTNER		13.	Iment must be filed to change a general partner. ADDRESS CHANGES ONLY		
DOCUMENT /	A0000000				ADDITES CHANGES ONE		
NAME		nty-two partners, I	LTD.	STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		h franklin street, :		CITY-ST-ZIP	04 /38/63 01065 021 **141-25		
DOCUMENT # NAME				STREET ADDRESS	000017578480 04/30/0301065021 **141.25		
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14. Thereby 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

I.W. Twenty-Two, Ltd. By: TWC Twenty-Two, Inc. SIGNATURE: By: SIGNA

SIAPLE UMEUN MEME

(813) 281-8888

Daytime Phone #