2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

FILED Apr 27, 2007 08:00 A Secretary of State DOCUMENT # A01000001106 TWC TWENTY-NINE PARTNERS, LTD. Principal Place of Business Mailing Address 655 NORTH FRANKLIN STREET, SUITE 2200 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA. FL 33602 TAMPA, FL 33602 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04032007 CR2E003 (12/06) Chg-LP Applied For City & State City & State 4. FEI Number 59-3739103 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STOREY, BRENDA H Street Address (P.O. Box Number is Not Acceptable) 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA, FL 33602 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agont and title if applicable. DATE FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. P01000065703 DOCUMENT # STREET ADDRESS TWC TWENTY-NINE, INC. NAME 10000001739203 STREET ADDRESS 655 NORTH FRANKLIN STREET, SUITE 2200 CITY-ST-ZIP 05/14/07-80015-<u>019 500.0</u>0 CITY-ST-ZIP TAMPA, FL 33602 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAMÉ STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY- ST-ZIP DOCUMENT # STREET AODRESS NAME STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 TWC Twenty-Nine Partners, Ltd. By: TWC Twenty-Nine, Inc. By: By: APR 1 9 2007

Daytime Phone #

Chief Financial Officer

HAND TYPED ON PROVIDE LAWE OF SIGNING GENERAL PARTNER