## **2008 LIMITED PARTNERSHIP ANNUAL REPORT** Due By May 1, 2008

## **FILED** Apr 22, 2008 08:00 AN Secretary of State

•		
DOCUMENT # A0100001130  1. Entity Name TWC TWENTY-FIVE PARTNERS, LTD.		
Principal Place of Business	Mailing Address	
655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA, FL 33602	655 NORTH FRANKLIN STREET, SUITE 2200 Tampa, Fl 33602	



## DO NOT WRITE IN THIS SPACE

03192008 No Chg-LP CR2E003 (12/06)

. FEI Number		Applied For
45-0478361		Not Applicable
5. Certificate of Status Desired	\$8.75 Fee Red	Additional quired

STOREY, BRENDA H 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA, FL 33602

6. Name and Address of Current Registered Agent

## DO NOT WRITE IN THIS SPACE

the obliga	tions of registered agent.	
SIGNATURE	Signature typed or printed name of registered agent and title if applicable	DATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.0	00
		TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	GENERAL PARTNER INFORMATION P01000065710 TWC TWENTY-FIVE, INC. 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA, FL 33602	U00000914386 OS/08/08-80054-020 500.00
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME	•	DO NOT WRITE IN THIS SPACE

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 familiar with, and accept

14. It 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-Five Partners, Ltd. By: TWC Twenty-Five, Inc.

SIGNATURE:

Ву

STREET ADDRESS. CITY-ST-ZIP DOCUMENT# STREET ADDRESS CITY-ST-ZIP DOCUMENT #

STREET ADDRESS CHTY-ST-ZIP