

2001 UNIFORM BUSINESS REPORT (UBR)

0009154 AF

DOCUMENT # A94000000408

1. Entity Name
TWC EIGHTY-TWO, LTD.

FILED

01 MAY -1 PM 5:31

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA FL 33602	Mailing Address 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA FL 33602
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DO NOT WRITE IN THIS SPACE

MJH

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3232406		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
B&C CORPORATE SERVICES OF CENTRAL FL., INC 390 NORTH ORANGE AVENUE, SUITE 1100 ORLANDO FL 32801				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		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.

SIGNATURE _____ (NOT: Registered Agent Signature required when reinstating) _____ DATE _____

9. Capital Contributions as Shown on record. \$11,155,466.26	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	A95000002019 TWC EIGHTY-TWO PARTNERS, LTD. 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA FL 33602	STREET ADDRESS	
DOCUMENT #		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
DOCUMENT #		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
DOCUMENT #		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
DOCUMENT #		CITY-ST-ZIP	

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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 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 Eighty-Two, Ltd. By: TWC Eighty-Two Partners, Ltd. By: TWC Eighty-Two, Inc.

SIGNATURE: By: *John E. Koehn* **4/27/01** **(813) 281-8888**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER AS PARTNER Date Daytime Phone #

CR2E003 (11/00)