


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED

2005 APR 29 PM 2: 01

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # A94000000408
 1. Entity Name
 TWC EIGHTY-TWO, 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 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

6. Name and Address of Current Registered Agent
 MCDONOUGH, BRIAN J
 2200 MUSEUM TOWER
 150 WEST FLAGLER STREET
 MIAMI, FL 33130



03082005 Chg-LP CR2E003 (10/03)

4. FEI Number Applied For
 59-3232406 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 Brenda H. Storey
 655 N. Franklin Street, Suite 2200
 City Tampa, FL 33602 FL Zip Code

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 the obligations of registered agent.
 SIGNATURE Brenda H. Storey 4/15/05
Signature, typed or printed name of registered agent and title if applicable DATE

9. Capital Contributions as Shown on record. \$11,155,466.26 10. Amount of Capital Contributions in FLORIDA to date. \$11,155,466.26

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 #	A95000002019	STREET ADDRESS	
NAME	TWC EIGHTY-TWO PARTNERS, LTD.	CITY-ST-ZIP	
STREET ADDRESS	655 NORTH FRANKLIN STREET, SUITE 2200		
CITY-ST-ZIP	TAMPA, FL 33602		
DOCUMENT #		STREET ADDRESS	400054927524
NAME		CITY-ST-ZIP	05/23/05--01004--017 **526.25
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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 Brenda H. Storey 4/15/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #
Brenda H. Storey
Chief Financial Officer