

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC 21 AM 9:15

1. Name of Limited Partnership

1a. DOCUMENT #
A94000001716



TWC EIGHTY-EIGHT, LTD.

Mailing Address

6200 COURTNEY CAMPBELL CAUSEWAY, STE. 600
TAMPA FL 33607

Principal Office Address

6200 COURTNEY CAMPBELL CAUSEWAY, STE. 600
TAMPA FL 33607

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip Country

3. Date Formed or Registered

12/15/1994

3a. Date of Last Report

12/26/1995

4. State or Country of Formation

FL

6. FEI Number

59-3284655

7. Certificate of Status Desired

Applied For
 Not Applicable
\$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for details)

5a. Capital Contributions, as Shown on record

\$14,707,331.00

5b. Amount of Capital Contributions in Full (Other) to date

100.00

9. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENT. FLA., INC.
390 NORTH ORANGE AVENUE, SUITE 1100
ORLANDO FL 32801

10. If changed, New Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL Zip Code

10a. Pursuant to the provisions of sections 607.01 and 607.192, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of sections 607.01-607.192, Florida Statutes.

SIGNATURE (By General Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

TWC EIGHTY-EIGHT PARTNERS, L

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

6200 COURTNEY CAMPBEL

11b. City, State & Zip Code

TAMPA FL 33607

11c. Registration/Document Number

A95000001299

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with the filing is voluntary furnished and does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I receive the Division of Corporations from my liability of non-compliance with Sections 119.07(2)(b) in the event that the information supplied is deemed exempt from public access. Further certify that the information indicated on this form is true, correct and complete and that my signature shall have the same legal effect as if made under oath. Further certify that I am a General Partner of the limited partnership, partner or trustee responsible to execute the report as required by Chapter 607, Florida Statutes.

TWC Eighty-Eight Partners, Ltd. By: TWC Eighty-Eight, Inc., its Gen. Partner

SIGNATURE General Partner

By: *Debra F. Koehler* DATE 12/02/96

Sr. Vice Pres. Telephone Number 813/281-8888

Typed or Printed Name of General Partner (Type of Firm)