

2002 UNIFORM BUSINESS REPORT (UBR)

0004324 AV

DOCUMENT # A94000001718

1. Entity Name
TWC NINETY, LTD.

FILED
02 MAY -1 PM 5:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

DUE BY MAY 1, 2002

4. FEI Number 59-3284657 Applied For
Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
B&C CORPORATE SERVICES OF CENT. FLA., INC.
390 NORTH ORANGE AVENUE, SUITE 1100
ORLANDO FL 32801

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

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.
Japs Wilson, President of TWC Ninety, Inc., GP of TWC 90 Partners, Ltd., GP of TWC 90, Ltd.
SIGNATURE *[Signature]* By: Jack Wilson DATE 4/40/02

9. Capital Contributions as Shown on record. \$6,505,630.00

10. Amount of Capital Contributions in FLORIDA to date. \$6,505,630.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

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	
DOCUMENT #	A95000001802
NAME	TWC NINETY PARTNERS, LTD.
STREET ADDRESS	655 NORTH FRANKLIN STREET, SUITE 2200
CITY-ST-ZIP	TAMPA FL 33602
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700005503187--9
CITY-ST-ZIP	-05/10/02--01063--006 ****526.25 ****526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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 Ninety, Ltd. By: TWC Ninety Partners, Ltd. By: TWC Ninety, Inc.

SIGNATURE: By: *[Signature]* Date 4/30/02 813-281-8888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER resident Date Daytime Phone #

CR2E003 (9/01)