

**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
96 DEC 24 AM 9:14

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001299

TWC EIGHTY-EIGHT PARTNERS, LTD.



Mailing Address
**6200 COURTNEY CAMPBELL CAUSEWAY, SUITE 600
TAMPA FL 33607**

Principal Office Address
**6200 COURTNEY CAMPBELL CAUSEWAY, SUITE 600
TAMPA FL 33607**

3. Date Formed or Registered

08/31/1995

5a. Capital Contributions as Shown on record

\$100.00

3a. Date of Last Report

01/18/1996

5b. Amount of Capital Contributions in FLOs (as to date)

2. Mailing Address

2a. Principal Office Address

4. State or Country of Formation

FL

State, Apt. #, etc.

State, Apt. #, etc.

6. FL Number **59-3369946**

APPLIED FOR

Applied For
 Not Applicable

City & State

City & State

7. Certificate of Status Desired

\$8.75 Additional Fee Reported

Zip Country

Zip Country

8. Make checks payable to Dept. of State (See reverse side for information)

9. Name and Address of Current Registered Agent

**B&C CORPORATE SERVICES OF CENTRAL FL, INC
390 N. ORANGE AVENUE, SUITE 1100
ORLANDO FL 32801**

10. If changed, new Registered Agent's Office

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
State, Apt. #, etc. _____
City _____
Zip Code **FL**

10a. I am submitting this statement of information on or before 12/31/97 in compliance with the provisions of Section 609.01(1)(a) and (b), Florida Statutes. I, as shown, am a limited partnership organized or registered under the laws of the State of Florida. I submit this statement for the purpose of changing the registered or current registered agent, on both, in the State of Florida. Such change was authorized by its general partners. I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of sections 609.01(1)(a) and (b), Florida Statutes.

SIGNATURE (Registered 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)

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

11b. City, State & Zip Code

11c. Registration Document Number

TWC EIGHTY-EIGHT, INC.

6200 COURTNEY CAMPBELL

TAMPA FL 33607

P94000087898

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

12. I declare by certifying that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) if the content of the information supplied is determined to be exempt from public access. I further certify that the information indicated on this annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee of partnership. The certificate is required by chapter 609, Florida Statutes.

TWC Eighty-Eight, Inc., General Partner

SIGNATURE By:

Debra F. Koehler

he DATE

12/02/96

Typed or Printed Name of General Partner Signing Form

Debra F. Koehler, Sr. Vice Pres.

Daytime Telephone Number

813/281-8888

CP2503 (6/96)