


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # A95000001299  
 1. Entity Name  
 TWC EIGHTY-EIGHT PARTNERS, LTD.



Principal Place of Business  
 655 NORTH FRANKLIN STREET, SUITE 2200  
 TAMPA, FL 33602

Mailing Address  
 655 NORTH FRANKLIN STREET, SUITE 2200  
 TAMPA, FL 33602

2. Principal Place of Business  
 Suite, Apt #, etc  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt #, etc  
 City & State  
 Zip Country



03142006 Chg-LP CR2E003 (11/05)

4. FEI Number  
 59-3369946

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

STOREY, BRENDA H  
 655 NORTH FRANKLIN STREET, SUITE 2200  
 TAMPA, FL 33602

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

**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 #	P94000087896
NAME	TWC EIGHTY-EIGHT, INC.
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	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	1100000515872 04/29/06-80226-020 500.00
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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 exemptions contained in Chapter 119, 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-Eight Partners, Ltd., By: TWC Eighty-Eight, Inc.

SIGNATURE: Brenda H. Storey APR 10 2006 813-281-8888  
Signature and typed or printed name of signing general partner Date Daytime Phone #

Chief Financial Officer