

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000000518

1. Entity Name

TWC Ninety-Five Partners, Ltd.

FILED

00 MAY 15 PM 3:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 6200 Courtney Campbell Cswy Suite 600 Tampa, FL 33607	Mailing Address 6200 Courtney Campbell Cswy Suite 600 Tampa, FL 33607
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2. Principal Place of Business 555 North Franklin Street Suite, Apt. #, etc. Suite 2200 City & State Tampa, FL	3. Mailing Address 655 North Franklin Street Suite, Apt. #, etc. Suite 2200 City & State Tampa, FL
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4. FEI Number 59-3445532	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Donough, Brian J.
200 Museum Tower
50 West Flagler Street
Miami, FL 33130

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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.

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Capital Contributions as Shown on record. \$50.00	10. Amount of Capital Contributions in FLORIDA to date. \$100.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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.

GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
ADDRESS ST-ZIP	P9700018900 TWC Ninety-Five, Inc. 6200 Courtney Campbell Cswy Ste 600 Tampa, FL 33607	STREET ADDRESS	655 North Franklin Street, Suite 2200
ADDRESS ST-ZIP		CITY-ST-ZIP	Tampa, FL 33602
ADDRESS ST-ZIP		STREET ADDRESS	
ADDRESS ST-ZIP		CITY-ST-ZIP	400003251824--9 -05/15/00--01015--023 ****193.75 ****141.25
ADDRESS ST-ZIP		STREET ADDRESS	
ADDRESS ST-ZIP		CITY-ST-ZIP	
ADDRESS ST-ZIP		STREET ADDRESS	
ADDRESS ST-ZIP		CITY-ST-ZIP	
ADDRESS ST-ZIP		STREET ADDRESS	
ADDRESS ST-ZIP		CITY-ST-ZIP	

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

SIGNATURE: By: Debra F. Koehler (813) 281-8888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #
Debra F. Koehler, Senior Vice President