

**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

<b>LIMITED PARTNERSHIP ANNUAL REPORT 1999</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
 JUN 15 1998  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

<b>1. Name of Limited Partnership</b>  TWC NINETY-FIVE, LTD.	<b>1a. DOCUMENT #</b> <b>A97000000519</b>
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<b>Mailing Address</b> 6200 COURTNEY CAMPBELL CAUSEWAY SUITE 600 TAMPA FL 33607	<b>Principal Office Address</b> 6200 COURTNEY CAMPBELL CAUSEWAY SUITE 600 TAMPA FL 33607
<b>2. Mailing Address</b> Suite, Apt. #, etc. City & State Zip Country	<b>2a. Principal Office Address</b> Suite, Apt. #, etc. City & State Zip Country

<b>3. Date Formed or Registered</b> 02/28/1997	<b>5a. Capital Contributions as Shown on record</b> \$714,478.00
<b>3a. Date of Last Report</b> 12/22/1997	<b>5b. Amount of Capital Contributions in FLORIDA to date</b> <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
<b>4. State or Country of Formation</b> FL	<b>7. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required
<b>6. FEI Number</b> 59-3445526	<b>8. Make check payable to: Dept. of State (See reverse side for fee information)</b>

<b>9. Name and Address of Current Registered Agent</b> MCDONOUGH, BRIAN J 2200 MUSEUM TOWER 150 W. FLAGLER STREET MIAMI FL 33130	<b>10. If changed, new Registered Agent/Office</b> Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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**10a.** Pursuant to the provisions of sections 620.1051 and 620.192, 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). Thereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, 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.**

<b>11. Name(s) of General Partner(s)</b> TWC NINETY-FIVE PARTNERS, LT	<b>11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)</b> 6200 COURTNEY CAMPBEL	<b>11b. City, State &amp; Zip Code</b> TAMPA FL 33607	<b>11c. Registration Document Number</b> A97000000518
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 -01/27/93-01063-021  
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**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 this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

By: TWC Ninety-Five, Inc.  
 SIGNATURE By: TWC Ninety-Five Partners, Ltd. By: *Debra F. Koehler* DATE *12/23/98*  
 By: Debra F. Koehler, Senior Vice President 813/281-8888  
 Daytime Telephone Number

CR2E003 (8/98)