

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

LIMITED PARTNERSHIP ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
 JUN 15 1997
 TAMPAY
 STATE OF FLORIDA



1. Name of Limited Partnership	1a. DOCUMENT # A97000001241
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TWC NINETY-ONE PARTNERS, LTD.

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

3. Date of Event or Registered	5a. Capital Contributions as Shown on record
06/04/1997	\$50.00
3a. Date of Last Report	5b. Amount of Capital Contributions in F-001A to date
12/22/1997	
4. State or Country of Formation	7. Certificate of Status Desired
FL	<input type="checkbox"/> \$8.75 Additional Fee Required
6. FRI Number	8. Make check payable to Dept. of State (See reverse side for fee information)
59-3455317	
	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable

2. Mailing Address	2a. Principal Office Address
Suite, Apt #, etc	Suite, Apt #, etc
City & State	City & State
Zip Country	Zip Country

9. Name and Address of Current Registered Agent	Name
MCDONOUGH, BRIAN J 2200 MUSEUM TOWER 150 WEST FLAGLER STREET MIAMI FL 33130	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt #, etc
	City
	Zip Code

10. If changed, name Registered Agent/Officer
FL

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.

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 NINETY-ONE, INC.	6200 COURTNEY CAMPBELL	TAMPA FL 33607	P97000049164

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, partner or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

TWC Ninety-One Partners, Ltd.
 SIGNATURE By: TWC Ninety-One, Inc. By: *Debra F. Koehler* DATE: 12/23/98
 Debra F. Koehler, Senior Vice President
 813/281-8888
 Typed or Printed Name of General Partner Signing Form _____ Daytime Telephone Number _____

CR2503 (8-98)