

**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

FILED

99 JAN -5 PM 4: 30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #  
**A97000001938**

TWC EIGHTY-FOUR 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 <b>09/09/1997</b>	5a. Capital Contributions as Shown on record.  <b>\$100.00</b>
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report <b>12/22/1997</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation <b>FL</b>	5b. Amount of Capital Contributions in FLORIDA to date:
City & State		City & State		6. FEI Number <b>59-3503804</b> <del>APPLIED FOR</del> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	7. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office	
MCDONOUGH, BRIAN J STEARNS WEAVER MILLER WEISSLER ALHADEFF 150 W. FLATLER ST., MUSEUM TOWER STE. 2200 MIAMI FL 33130		Name	
		Street Address (P.O. Box Number Is Not Acceptable)	
		Suite, Apt. #, etc.	
		City	Zip Code

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). I hereby 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 EIGHTY-FOUR, INC.	6200 COURTNEY CAMPBEL	TAMPA FL 33607	P94000021545
400002755664--2 -01/27/99--01002--001 ***141.25 ***141.25 <b>T.J.C.</b> JAN			

**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.

TWC Eighty-Four Partners, Ltd.  
SIGNATURE 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

CR2E003 (8/98)