

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC 22 PM 1:39

1. Name of Limited Partnership TWC Ninety-Seven, Ltd.	1a. DOCUMENT # A97000001942
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Mailing Address 6200 Courtney Campbell Causeway, Suite 600 Tampa, Florida 33607	Principal Office Address 6200 Courtney Campbell Causeway, Suite 600 Tampa, Florida 33607	3. Date Formed or Registered 09/09/97	5a. Capital Contributions as Shown on record \$50.00
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	3a. Date of Last Report N/A	
		4. State or Country of Formation FL	
		6. FEI Number 59-3475069	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See reverse side for fee information)			

9. Name and Address of Current Registered Agent Brian J. McDonough Stearns Weaver Miller Weissler Alhadeff Museum Tower, Suite 2200 150 West Flagler Street Miami, Florida 33130	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. 000002385480--5 -12/30/97--01037--007 City ****156 FE ****156.25
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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). 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 Ninety-Seven Partners, Ltd.	6200 Courtney Campbell Causeway Suite 600	Tampa, Florida 33607	A97000001941

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 Ninety-Seven Partners, Ltd., By: TWC Ninety-Seven, Inc., its Gen. Partner
SIGNATURE General Partner By: *Debra F. Koehler* DATE 12/08/07
Typed or Printed Name of General Partner Signing Form Debra F. Koehler, Sr. Vice Pres. Daytime Telephone Number 813/281-8888

CR2E003 (6/97)