2002 UNIFORM BUSINESS REPORT (UBR)

000419 1 AV

DOCUMENT # A97000001942

1. Entity Name

TWC NINETY-SEVEN, LTD.

FILED
02 MAY -1 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
MJH

Principal Place of Business	Mailing Address
655 NORTH FRANKLIN STREET STE 2200 TAMPA FL 33602	655 NORTH FRANKLIN STREET STE 2200 TAMPA FL 33602

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

5/1

DUE BY MAY 1, 2002

4. FEI Number 59-3475069 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCDONOUGH, BRIAN J STEARNS WEAVER MILLER WEISSLER ALHADEFF 150 W. FLAGLER ST., MUSEUM TOWER STE. 2200 MIAMI FL 33130	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. $5,888,845.56

10. Amount of Capital Contributions in FLORIDA to date. $ 5,947,704.56

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

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.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	A97000001941	STREET ADDRESS	
NAME	TWC NINETY-SEVEN PARTNERS, LTD.		
STREET ADDRESS	655 NOTH FRANKLIN STREET, STE 2200 0	CITY-ST-ZIP	
CITY-ST-ZIP	TAMPA FL 33602		
DOCUMENT #		STREET ADDRESS	000005601020--0
NAME			-05/24/02--01010--003
STREET ADDRESS		CITY-ST-ZIP	****938.26 ****526.25
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CITY-ST-ZIP			

14. 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-Seven, Ltd. By: TWC Ninety-Seven Partners, Ltd. By: TWC Ninety-Seven, Inc.

SIGNATURE: By: SIGNATURE REQUIRED 4/30/02 813-281-8888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER President Date Daytime Phone #

CR2E003 (9/01)