#### 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

### FILED Apr 22, 2008 08:00 AN Secretary of State

	IMENT #	4 4 0 7 0 4	ስስስስ	10//2
1 36 36 31	$1NI \vdash NII \pm$	t A9701		1947

1. Entity Name

TWC NINETY-SEVEN, LTD.



Principal Place of Business

Mailing Address

655 NORTH FRANKLIN STREET

655 NORTH FRANKLIN STREET STE 2200

STE 2200 TAMPA, FL 33602

TAMPA, FL 33602



### DO NOT WRITE IN THIS SPACE

03192008 No Chg-LP

CR2E003 (12/06)

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

STOREY, BRENDA H 655 NORTH FRANKLIN STREET STE 2200 TAMPA, FL 33602

## DO NOT WRITE IN THIS SPACE

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.	I am familiar with,	and accept
	the obligations of registered agent.		

SIGNATUR

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

Signature, typed or printed name of registered agent and title if applicable

DATE

#### FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00

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.

ı		NOTE: General Partners MAY NOT be changed on the					
ĺ	12.	GENERAL PARTNER INFORMATION					
	DOCUMENT #	A97000001941					
ı	NAME	TWC NINETY-SEVEN PARTNERS, LTD.	_				
ı	STREET ADDRESS	655 NOTH FRANKLIN STREET, STE 2200	0				
	CITY-ST-ZIP	TAMPA, FL 33602					
	DOCUMENT ₹						
ı	NAME						
l	STREET ADDRESS						
ĺ	CITY-ST-ZIP						
	DOCUMENT #						
I	NAME						
ı	STREET ADDRESS						
l	CITY-ST-ZIP						
ſ	DOCUMENT #						
Į	NAME						
İ	STREET ADDRESS						
l	CITY-SI-ZIP						

000000914259 05/08/08-80050-003 500.00

# DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 trustage amprovered to exempte this report as required by Chapter 620, Florida Statutes

By: TWC Ninety-Seven, Inc.

Breightau Hangriffe on Printed Name of Signing GEN Chief Financial Officer

GEN RAL PARTNER

1-18-08 813-281-8888

Daytime I