2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR) A01000001112 **DOCUMENT #** 1. Entity Name TWC TWENTY-THREE PARTNERS, LTD. Principal Place of Business 655 NORTH FRANKLIN ST., STE 2200 Mailing Address 655 NORTH FRANKLIN St., STE 2200 TAMPA FL 33602 **TAMPA FL 33602**

FILED APR 30 AM 10: 33

SECRETARY OF STATE TALLAHASSEE, FLORIDA

2. Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Addres	3. Mailing Address		T (BB) BY TAKE BOTH STOCK TRUE BOTH BOTH BOTH BOTH STORY HAR HAR HAR STORY HAR		
		Suite, Apt. #, etc. City & State			DUE BY MAY 1, 2003		
				4. FEI Numb	4. FEI Number APPLIED FOR Applied FO		
Zip	Country	Zip	Country	5. Certificate	e 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 655 NORTH FRANKLII TAMPA FL 33602				eet Address (P.O. Box Numb	er is Not Acceptable)		
			Cit	'	FL	Zip Code	
8. The above named entity the obligations of register		the purpose of char	nging its registered offi	ce or registered agent, or bo	th, in the State of Florida. I am	familiar with, and accept	
SIGNATURE Signature, typed o	or printed name of registered agent a	nd title if applicable.			CATE		
Capital Contributions as Shown on record.	\$100.00		of Capital Contribution DA to date.	s	11. MAXE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION		
AG	ENERAL PARTNER T	HAT IS A BUSINE	SS ENTITY MUST	BE REGISTERED AND	ACTIVE WITH THIS OFFICE	<u> </u>	

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 # NAME	P01000065734 TWC TWENTY-THREE, INC.	STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	655 NORTH FRANKLIN ST, STE 2200 TAMPA FL	CITY-ST-ZIP	U4/30/03 U1072020 **141.25				
DOCUMENT # NAME		STREET ADDRESS	400017583054 04/30/0301072020 **141.25				
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DOCUMENT # NAME		STREET ADDRESS	·				
STREET ADDRESS		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 received. Florida Statutes.

SIAPLE UMEON MEKE

(813)281-8888