

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A96000000567**

1. Entity Name

TWC NINETY-SIX PARTNERS, LTD.

FILED

02 MAY -1 PM 5:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**655 N. FRANKLIN ST., SUITE 2200
TAMPA FL 33602**

Mailing Address

**655 N. FRANKLIN ST., SUITE 2200
TAMPA FL 33602**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

Zip

Country

Zip

Country

4. FEI Number

59-3370924

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

**B&C CORPORATE SERVICES OF CENTRAL FLA., INC
390 N. ORANGE AVENUE, SUITE 1100
ORLANDO FL 32801**

Name
Jack Wilson

Street Address (P.O. Box Number is Not Acceptable)
655 North Franklin Street, Suite 2200

City
Tampa

FL

Zip Code
33602

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.

Jack Wilson, President of TWC 96, Inc., GP of TWC 96 Partners, Ltd.

SIGNATURE

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

By:

Jack Wilson

4/30/02

DATE

9. Capital Contributions
as Shown on record.

\$100.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$100.00

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 # **P96000010684**
NAME **TWC NINETY-SIX, INC.**
STREET ADDRESS **655 N. FRANKLIN ST., SUITE 2200**
CITY-ST-ZIP **TAMPA FL 33602**

STREET ADDRESS

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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-Six Partners, Ltd. By: TWC Ninety-Six, Inc.

SIGNATURE:

By: **John F. Boeckle**

President

Date

813-281-3888

Daytime Phone #

CR2E003 (9/01)

0004265 AV