

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 21 AM 9:11

1. Name of Limited Partnership

1a. DOCUMENT #
A96000000571



TWC NINETY-TWO, LTD.

Mailing Address:

6200 COURTNEY CAMPBELL CAUSEWAY, STE. 600
TAMPA FL 33607

Principal Office Address:

6200 COURTNEY CAMPBELL CAUSEWAY, STE. 600
TAMPA FL 33607

3. Date Formed or Registered

03/22/1996

5a. Capital Contributions as Shown on record

\$50.00

3a. Date of Last Report

5b. Amount of Capital Contributions in FL of 10% for state

2. Mailing Address:

State, Apt. #, etc:

City & State:

Zip Country:

2a. Principal Office Address:

State, Apt. #, etc:

City & State:

Zip Country:

4. State or Country of Formation

FL

6. FEI Number

59-3370920

Applied For
 Not Applicable

7. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Make check payable to Dept. of State (also reverse side for fee information)

9. Name and Address of Current Registered Agent

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

10. If changed, new Registered Agent/Office

Name:

Street Address (P.O. Box Number Is Not Acceptable):

State, Apt. #, etc:

City:

FL Zip Code

10a. Pursuant to the provisions of sections 607.01(1)(b) and 607.01(2), Florida Statutes, the above named limited partnership (partners) 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 understand the obligations of sections 607.01(2), 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)

TWC NINETY-TWO PARTNERS, LTD
FLORIDA DESIGN COMMUNITIES,

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

6200 COURTNEY CAMPBELL
1701 SOUTH ALEXANDER,

11b. City, State & Zip Code

TAMPA FL 33607
PLANT CITY FL 33567

11c. Registration Document Number

A96000000565
P17013

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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I, the entity that filed this document (applicant), with this filing, voluntarily furnished information that does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report, the financial statements and other signatures 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 of an insolvent partnership, as provided in Chapter 607, Florida Statutes.

TWC Ninety-Two Partners, Ltd., By: TWC Ninety, Inc., its Gen. Partner

SIGNATURE General Partner

By:

Debra F. Koehler
Sr. Vice President

12/02/96

Type for Printed Name of General Partner Signing Form

Telephone Number

813/281-8888

CR 9601000022