## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998

TWC EIGHTY-FIVE PARTNERS, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT#** A97000001175

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				QD12/29		
Malling Address 6200 COURTNEY CAMPBELL CAUSEWAY. SUITE 600 TAMPA FL 33607	Principal Office Address 6200 COURTNEY CAMPBELL CAUSEWAY, SUITE 600 TAMPA FL 33607		600 0	bate Formed or Registered  5/27/1997  Date of Last Roport	58. Capital Contributions as Shown on record.	
2. Mailing Address  Sulte, Apt. #, etc.  City & State  Zip Country	2a. Principal Office Address  Suite, Apt. #, etc.  City & State  Zip Country		7. c	El Number 59-3455348 entificate of Stalus Dosired	5b. Amount of Capital Contributions in FLORIDA to date  Applied For Not Applicable  \$8.75 Additional Foe Required of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent  MCDONOUGH, BRIAN J 2200 MUSEUM TOWER 150 WEST FLAGLER STREET MIAM! FL 33130  City  City  City  FL  Zip Code  Togistered under the laws of the State of Florida, submits this statement for the purpose of changing its registered disce 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, and accept the obligations of section 620.192, Florida Statutes  BIGNATURE (Registered Agent Accepting Appointment)  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)	Address of Each Genera  11a. (Do NO1 Use Post Office Bo	al Partner ox Numbers)	<b>11b.</b> c	ity, State & Zip Code	11c. Registration/ Document Number	
TWC EIGHTY-FIVE, INC.	6200 COURTNEY CAMPB	EL.	TAMPA F	L 33607	P97000046728	

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

12. I do hereby certify that the Information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119 07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this ennual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this tegorial step used my superior field. Florida Statutos and Partner NATURE By:

SIGNATURE By:

Typed or Printed Name of General Partner Signing Form

Debra F. Koehler, Sr. Vice Pres.

Daytime Telephone Number

813/281-8888