

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 27, 2007 08:00 A
Secretary of State

DOCUMENT # A97000001920
 1. Entity Name
 TWC EIGHTY-NINE PARTNERS, LTD.



Principal Place of Business: 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA, FL 33602
 Mailing Address: 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA, FL 33602

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country



04052007 Chg-LP CR2E003 (12/06)

4. FEI Number: 59-3477739
 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, SUITE 2200
 TAMPA, FL 33602

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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.

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

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P97000077219	STREET ADDRESS	
NAME	TWC EIGHTY-NINE, INC.	CITY-ST-ZIP	UD00000739257
STREET ADDRESS	655 NORTH FRANKLIN STREET, SUITE 2200		05/14/07-80018-018 500.00
CITY-ST-ZIP	TAMPA, FL 33602		
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing 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 trustee empowered to execute this report as required by Chapter 620, Florida Statutes

By: Brenda H. Storey APR 19 2007
 SIGNATURE: _____ Date
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Brenda H. Storey
 Chief Financial Officer