

# 2012 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000001920

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Entity Name:** TWC EIGHTY-NINE PARTNERS, LTD.

**Current Principal Place of Business:**

655 NORTH FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

655 NORTH FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602

**New Mailing Address:**

**FEI Number:** 59-3477739

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILSON, CAROLYN M  
655 NORTH FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #: P97000077219  
Name: TWC EIGHTY-NINE, INC.  
Address: 655 NORTH FRANKLIN STREET, SUITE 2200  
City-St-Zip: TAMPA, FL 33602

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: TWC EIGHTY-NINE, INC.

\_\_\_\_\_ Electronic Signature of Signing General Partner

03/23/2012

\_\_\_\_\_ Date