

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**DOCUMENT # A97000001921**  
 1. Entity Name  
**TWC EIGHTY-NINE, LTD.**



05 MAY -9 PM 2:57

TALLAHASSEE, FLORIDA

**MJH**

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  
 Suite, Apt. #, etc.

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

City & State

Zip Country

03092005 Chg-LP CR2E003 (10/03) **5/9**

4. FEI Number  
**59-347742**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**MCDONOUGH, BRIAN J  
 STEARNS WEAVER MILLER WESSLER ALHADEFF  
 150 W. FLAGLER ST., MUSEUM TOWER STE. 2200  
 MIAMI, FL 33130**

7. Name and Address of New Registered Agent  
 Name  
**Brenda H. Storey**  
 Street Address (P.O. Box Number is Not Acceptable)  
**655 N. Franklin Street, Suite 2200**  
 City, State, Zip Code  
**Tampa, FL 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE *Brenda H. Storey* DATE 4/15/05

9. Capital Contributions as Shown on record. **\$3,809,731.52**

10. Amount of Capital Contributions in FLORIDA to date. **\$3,915,989.52**

**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	
DOCUMENT #	A97000001920
NAME	TWC EIGHTY-NINE PARTNERS, LTD.
STREET ADDRESS	655 NORTH FRANKLIN STREET, SUITE 2200
CITY-ST-ZIP	TAMPA, FL 33602
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<b>800054090758</b>
CITY-ST-ZIP	<b>05/09/05--01001--009 **1270.00</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

**\$ 526.25**

STAPLE CHECK HERE

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 who is required to execute this report as required by Chapter 620, Florida Statutes.

By: **TWC Eighty-Nine, Inc.**  
 By: *Brenda H. Storey* DATE 4/15/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER **Brenda H. Storey** Daytime Phone #

**Chief Financial Officer**