

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

000419 AV

DOCUMENT # A97000002321



1. Entity Name
TWC SEVENTY-TWO PARTNERS, LTD.

FILED
03 APR 30 AM 5:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA FL 33602	Mailing Address 655 NORTH FRANKLIN STREET, SUITE 2200 TAMPA FL 33602
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-3488779** Applied For
Not Applicable

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

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCDONOUGH, BRIAN J
STEARNS WEAVER MILLER WEISSLER ALHADEFF
150 W. FLAGLER ST., MUSEUM TOWER STE. 2200
MIAMI FL 33130**

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.

9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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

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DOCUMENT # P97000092009 NAME TWC SEVENTY-TWO, INC. STREET ADDRESS 655 NORTH FRANKLIN STREET, SUITE 2200 CITY-ST-ZIP TAMPA FL 33602	STREET ADDRESS CITY-ST-ZIP 04/30/03 01059-022 **141.25
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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 empowered to execute this report as required by Chapter 620, Florida Statutes

TWC Seventy-Two, Inc.
SIGNATURE: By *Debra F. Koehler*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Debra F. Koehler, Senior Vice President

Date **4-30-03** (813) 281-8888
Daytime Phone #

CR2E003 (10/02)

SIMPLE CHECK MEMO