

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000002581



1. Entity Name
 TWC EIGHTY-SEVEN, LTD.

Principal Place of Business
 655 N. FRANKLIN ST., SUITE 2200
 TAMPA, FL 33602

Mailing Address
 655 N. FRANKLIN ST., SUITE 2200
 TAMPA, FL 33602



2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country

01292004 Chg-LP CR2E003 (10/03)

4. FEI Number
 59-3551779

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCDONOUGH, BRIAN J
 2200 MUSEUM TOWER
 150 WEST FLAGLER STREET
 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 _____
Signature typed or printed name of registered agent and title if applicable

DATE _____

9. Capital Contributions as Shown on record \$8,820,338.00

10. Amount of Capital Contributions in FLORIDA to date. 8,820,338.00

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 # A98000002580
 NAME TWC EIGHTY-SEVEN PARTNERS, LTD.
 STREET ADDRESS 655 N. FRANKLIN ST., SUITE 2200
 CITY-ST-ZIP TAMPA, FL 33602

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

U00000159550
 05/10/04-80035-005 526.25

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

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 Eighty-Seven, Ltd., By: TWC Eighty-Seven Partners, Ltd., By: TWC Eighty-Seven, Inc.

SIGNATURE: By: Brenda H. Storey 4/27/04 (813) 281-8888