

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

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

<b>DOCUMENT # A99000000738</b> 1. Entity Name <b>TWC SIXTY-EIGHT PARTNERS, LTD.</b>					
Principal Place of Business <b>655 NORTH FRANKLIN STREET, SUITE 2200          TAMPA, FL 33602</b>			Mailing Address <b>655 NORTH FRANKLIN STREET, SUITE 2200          TAMPA, FL 33602</b>		
2. Principal Place of Business Suite, Apt #, etc.			3. Mailing Address Suite, Apt #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>59-3576337</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>MCDONOUGH, BRIAN J          2200 MUSEUM TOWER          150 WEST FLAGLER STREET          MIAMI, FL 33130</b>				7. Name and Address of New Registered Agent Name Street Address (P O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. <b>\$100.00</b>			10. Amount of Capital Contributions in FLORIDA to date <b>\$100.00</b>		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # <b>P98000092050</b> NAME <b>TWC SIXTY-EIGHT, INC.</b> STREET ADDRESS <b>655 NORTH FRANKLIN STREET, SUITE 2200</b> CITY- ST- ZIP <b>TAMPA, FL 33602</b>			STREET ADDRESS CITY- ST- ZIP		
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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. <b>TWC Sixty-Eight Partners, Ltd., By: TWC Sixty-Eight, Inc.</b>					
SIGNATURE: By: <u>Brenda N. Storey</u> <b>4/27/04</b> (813) 281-8888 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

STAPLE CHECK HERE