

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000002286 (3)

1. Corporation Name
TWI-BRADENTON, INC.



Principal Place of Business: **ONE ERIEVIEW PLAZA, #1300 CLEVELAND OH 44114**
Mailing Address: **ONE ERIEVIEW PLAZA, #1300 CLEVELAND OH 44114**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/12/1993	3a. Date of Last Report 04/18/1995
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 31-1376149	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City		
				FL	85		Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating.) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP MCCORMACK, MARK A ONE ERIEVIEW PLAZA, #1300 CLEVELAND OH 44114	<input type="checkbox"/> DELETE	1. 1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DVS LAFAVE, ARTHUR J JR. ONE ERIEVIEW PLAZA, #1300 CLEVELAND OH 44114	<input type="checkbox"/> DELETE	2. 1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	AS CARPENTER, WILLIAM H ONE ERIEVIEW PLAZA, #1300 CLEVELAND OH 44114	<input checked="" type="checkbox"/> DELETE	2. 2 NAME 2. 3 STREET ADDRESS 2. 4 CITY - ST - ZIP
CITY - ST - ZIP	T YODER, RAY A ONE ERIEVIEW PLAZA, #1300 CLEVELAND OH 44114	<input checked="" type="checkbox"/> DELETE	3. 1 TITLE S CARFAGNA, PETER A. (ASST) ONE ERIEVIEW PLAZA #1300 CLEVELAND OH 44114
TITLE		<input type="checkbox"/> DELETE	4. 1 TITLE T OSBORNE, DAVID A., JR. ONE ERIEVIEW PLAZA #1300 CLEVELAND OH 44114
NAME		<input type="checkbox"/> DELETE	4. 2 NAME 4. 3 STREET ADDRESS 4. 4 CITY - ST - ZIP
STREET ADDRESS		<input type="checkbox"/> DELETE	5. 1 TITLE 5. 2 NAME 5. 3 STREET ADDRESS 5. 4 CITY - ST - ZIP
CITY - ST - ZIP		<input type="checkbox"/> DELETE	6. 1 TITLE 6. 2 NAME 6. 3 STREET ADDRESS 6. 4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **5-8-96** DAYTIME PHONE #: **(216) 522-1200**

CR2E034 (12/95)