FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name M74251 (3)

TWC SIXTY-ONE, INC.

TAMPA FL

CITY-S1-ZP

| Principal Place | e of Business | Mailing Address | | ······································ | | |
|--|---|---|---|---|--|--|
| % JACK WILSON 6200 COURTNEY CAMPBELL CSWY STE. 600 TAMPA FL 33607 TAMPA FL 33607 | | | BELL CSWY. | ., STE. 600 | | |
| | | | | | 3. Date Incorporated or Qualified 03/29/1988 | 3a. Date of Last Report 04/29/1996 |
| 2. Principal Place of Business 2a. Mailing Add | | | | · · · · · · · · · · · · · · · · · · · | 4. FEI Number | Applied For |
| 21 26 | | | | | 59-2886277 | Not Applicable |
| Suite, Apt #, etc Sui | | Suite, Apt. #, etc. | Solie, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | e . | City & State | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Coul | ntry | 8. This corporation has liability for i | |
| 24 | 25 | 29 | 30 | | Florida Statutes L. 10. Name and Address of New Re | Yes X No |
| | 9. Name and Address of Current | Hegistered Agent | | 81 Name | 10. Name and Address of New Ne | Sistered Agent |
| | SON, JACK | WAV | Į | Tranie | | |
| 6200 COURTNEY CAMPBELL CAUSEWAY SUITE 600 | | | | 82 Street Add | ress (P.O. Box Number is Not Acceptab | ole) |
| | MPA FL 33607 | | 1 | 83 | ······································ | |
| i ru | III N I E OOO! | | | 84 City | | 85 Zip Code |
| | | | | | | |
| 11. Pursuant office or ragent. La | to the provisions of Sections 607.0502 registered agent, or both, in the State on In familiar with, and accept the obligation | and 607.1508, Florida Stat of Florida. Such change was ions of, Section 607.0505. | utes, the ab s authorized Florida Stati | oove-named corpora t by the corpora utes. | poration submits this statement for the p tion's board of directors. I hereby accep | ourpose of changing its registered of the appointment as registered |
| SIGNATURE | | | | | | |
| | Signature, typed or printed name of registered agen OFFICERS AND | | OTE: Registered | Agent signature requi | red when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE PERS AND DIRECTORS IN 12 |
| 12. | DPT OFFICERS AND | DELETE | 1,1 70 | ri F | ADDITIONS/CHANGES TO OTTE | Change Addition |
| NAME | WILSON, JACK | | 1,2 NA | | | |
| STREET ADDRESS | 6200 COURTNEY CAMPBELL | | | REET ADORESS | | |
| CITY - S1 - ZiP | TAMPA FL | | | TY-ST-ZIP | | |
| TITLE | D | DELETE | 2.1 Ti1 | | | ☐ Change ☐ Addition |
| NAME | WILSON, CAROLYN M. | | 2.2 NA | IME | | |
| STREET ADDRESS | 6200 COURTNEY CSWY.,#600 | | 2.3 ST | REET ADDRESS | | |
| CITY-S1-ZIP | TAMPA FL | | 2. 4 C | ITY-ST-ZIP | | |
| TITLE | V\$ | DELETE | 3.1 Til | [LE | | Change Addition |
| NAME | KOEHLER, DEBRA F. | | 3.2 NA | IME . | | |
| STREET ADDRESS | 6200 COURTNEY CAMPBELL (| CAUSEWAY, #600 | 3.3 \$1 | REET ADDRESS | | i |
| C:TY-ST-ZIP | TAMPA FL | | | ITY-ST-ZIP | | |
| TITLE | S | DELETE | 4.1 TI | | | Change Addition |
| NAME | MITCHELL, STEPHEN J. | | 4. 2 N | | | |
| STREET ADDRESS | ONE TAMPA CITY CENTER | | | REET ADDRESS | | |
| CITY-ST-ZIP | TAMPA FL | □ NE(EXE | | TY - ST - ZIP | | Change Addition |
| TITLE | V | DELETE | 5.1 11 | | | C Cuanda C Xdoutou |
| NAME | WELCH, GARY E | 14130F34/4V #600 | 5.2 N/ | | | |
| STREET ADDRESS | 6200 COURTNEY CAMPBELL (| JAUSEWAY, FBUU | | REET ADDRESS | | |
| CHY-ST-ZIP | TAMPA FL | DELETE | | TY-ST-ZIP | <u> </u> | Change Addition |
| TITLE | POWEDO OUDIOTORIED O | L.J DELETE | 6.1 TI | ł | | TT CHANGE TT MODITION |
| NAME | BOWERS, CHRISTOPHER G | AAAA VAUMOITA | 6.2 N | | | |
| STREET ADDRESS | 8200 COURTNEY CAMPBELL (| AUSEWAT. FOUL | ■ 63 S1 | REET ADDRESS | | |

14. I do 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 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.

TWC Sixty-One. Inc. Debra F. Koehler, Sr. Vice Pres. 04/25/97 813/281-8888

64 CITY-ST-ZIP