2008 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

1. Entity Name

TWC SEVENTY-NINE DEVELOPMENT, INC.

DOCUMENT # P01000102453



Principal Place of Business Mailing Address

655 NORTH FRANKLIN ST., STE. 2200 TAMPA, FL 33602

655 NORTH FRANKLIN ST., STE. 2200 TAMPA, FL 33602

FILED Apr 22, 2008 08:00 AN Secretary of State



03192008

No Chg-P

CR2E034 (11/05)

4. FE! Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STOREY, BRENDA H 655 N FRANKLIN STREET, SUITE 2200 TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

8.	3. 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 little if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000913484 OS/08/08-80017-018 150.00

10. OFFICERS AND DIRECTORS TITLE WILSON, CAROLYN M NAME STREET ADDRESS 655 N FRANKLIN STREET, STE 2200 TAMPA, FL 33602 CHY-ST-ZIP TITLE **CFPS** STOREY, BRENDA H NAME STREET ADDRESS 655 N FRANKLIN STREET, STE 2200 CHY-SI-7P TAMPA, FL 33602 TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brenda Stora SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

> Brenda H. Storey O Chief Financial Officer