

**PROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000051704

1. Corporation Name
TWC OF FLORIDA, INCORPORATED

Principal Place of Business

11600 53RD ST N
CLEARWATER FL 34670
US

Mailing Address

101 GORDON DR
LIONVILLE PA 19353

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/19/1993

4. FEI Number

52-1834733

Applied For

Not Applicable

5. Certificate of Status Desired
☐
**\$8.75 Additional
Fee Required**
6. Election Campaign Financing
☐
**\$5.00 May Be
Added to Fees**
**8. This corporation owes the current year intangible
Personal Property Tax.**
☒ Yes☐ No
9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
CORPORATION SERVICE COMPANY
82 Street Address (P.O. Box, etc., is not acceptable)
1201 Hayes Street
83
84 City
Tallahassee
85 Zip Code
FL 32301

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 *Heborah N. Skipper* as agent

DATE

6-8-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DS**
STREET ADDRESS **GAILEY, JOHN R III**
CITY-ST-ZIP **101 GORDON DR**
LIONVILLE PA

TITLE ☒ DELETE

NAME **D**
STREET ADDRESS **WHITE, STEPHEN J**
CITY-ST-ZIP **101 GORDON DR**
LIONVILLE PA 19341-0645

TITLE ☐ DELETE

NAME **P**
STREET ADDRESS **MCCLEERY FRED**
CITY-ST-ZIP **11600 53RD STREET N**
CLEARWATER FL

TITLE ☐ DELETE

NAME **T**
STREET ADDRESS **BARTLES, GWEN**
CITY-ST-ZIP **11600 53RD ST N**
CLEARWATER FL

TITLE ☐ DELETE

NAME **VP**
STREET ADDRESS **WHITE, STEPHEN J**
CITY-ST-ZIP **101 GORDON DR**
LIONVILLE PA 19341-0645

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME ☐ Change ☐ Addition

1.3 STREET ADDRESS ☐ Change ☐ Addition

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

Director
Stephen M. Heumann
101 Gordon Drive
Lionville, PA 19341

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 179.07(1)(b), 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, with all other like empowered.

SIGNATURE: *Stephen M. Heumann* **Stephen M. Heumann** 4/23/99 610 594-2900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)