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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400082557 (7)

TWC EIGHTY-TWO DEVELOPMENT, INC.

Principal Place	of Business	Mailing Addres	Mailing Address) (\$\$)(\$\$) (10 4011) \$1011 \$\$111 \$\$111 \$\$111 \$\$111 \$\$111 \$\$111 \$\$111 \$\$111
6200 COURTNEY CAMPBELL CAUSEWAY		6200 COURTNE	6200 COURTNEY CAMPBELL CAUSEWAY			
SUITE 600		SUITE 600				DO NOT WRITE IN THIS SPACE
TAMPA FL 33607		TAMPA FL 336				3. Date Incorporated or Qualified
						11/10/1994
6 Principal D	ace of Business	2a, Mailing Add	ress.			4, FEI Number Applied For
2. Principal Place of Business		<u> </u>	26			59-3280571 Not Applicable
Suite, Apl. #, etc.		-	Suite, Apt. #, etc.			S8 75 Additional
22			27			5. Certificate of Status Desired Fee Required
City & State			City & State			6. Election Campaign Financing \$5.00 May Be
23		k1	28			Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes X No
E-4	g Name and Address of Curre					10. Name and Address of New Registered Agent
1470	<u> </u>			81 Name		
WILSON, JACK				-		Add a CO Day Name is Not Associated a
6200 COURTNEY CAMPBELL CAUSEWAY				82	Street	t Address (P.O. Box Number is Not Acceptable)
SUITE 600				83	 	
TAN	APA FL 33607				<u> </u>	
				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						
Signature, typed or printed name of registered agent and tatio if applicable (NOTE				g stered Ag	ent signatu	ие required when reinstating) DATE
12.		ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPT	[_] [DELETE	1.1 TITLE		Change Addition
NAME	WILSON, JACK			1.2 NAME		
STREET ADDRESS	6200 COURTNEY CAMPBELL	CAUSEWAY		1.3 STREET	Adoress	3 <u> </u>
CITY-ST-ZIP	TAMPA FL			1.4 CITY - 5	ST-ZIP	
TITLE	VS		DELETE	2.1 TITLE		Change Addition
NAME	KOEHLER, DEBRA F		i i	2.2 NAME		
STREET ADDRESS	6200 COURTNEY CAMPBELL	CAUSEWAY, #60	0	2.3 STREET	F ADDRESS	
CITY-ST-ZIP	TAMPA FL			2. 4 CiTY-	ST-Z(P	
TITLE	V		DELETE	3.1 TITLE		Change Addition
NAME	BOWERS, CHRISTOPHER G			3.2 NAME		
STREET ADDRESS	6200 COURTNEY CAMPBELL	CALISEWAY #RO	0	3.3 STREE	2239DDA 1	
1	TAMPA FL	. UNGOLITAL, FOO	` [3.4. CITY-		
CITY-ST-ZIP	V		XELETE	4 1 THLE	DI. FII	Change Addition
	. ▼			4 2 NAME		
NAME	WELCH, GARY E	CALICEWAY #00	,		I ADDRESS	,
STREET ADDRESS	6200 COURTNEY CAMPBELL	. UNUSEYYAT, #BU	٠ ا			
CITY-ST-ZIP	TAMPA FL		DELETE	4.4 CITY - 3	51-71	Change Addition
TITLE		اليا	/LLL11	5.1 TITLE		Grange Addition
NAME				5.2 NAME		
STREET ADDRESS					T ADDRESS	5
CITY-ST-ZIP				5.4 CITY-	ST-ZIP	Attack
TITLE			DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREE	T ADDRESS	\$

14. Thereby 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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 in attachment with an address.