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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000091342 (3) DOCUMENT #

1. Corporation Name

TWC EIGHTY-EIGHT DEVELOPMENT, INC.

Principal Place of Business Mailing Address 6200 COURTNEY CAMPBELL CAUSEWAY 6200 COURTNEY CAMPBELL CAUSEWAY SUITE 600 SUITE 600 DO NOT WRITE IN THIS SPACE **TAMPA FL 33607** TAMPA FL 33607 3. Date Incorporated or Qualified 12/16/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 59-3294759 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Žip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WILSON, JACK **6200 COURTNEY CAMPBELL CAUSEWAY** Street Address (P.O. Box Number is Not Acceptable) SUITE 600 83 **TAMPA FL 33607** 84 City 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, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE **DPT** 1.1 TITLE Change Addition NAME **WILSON, JACK** 1.2 NAME STREET ADDRESS 6200 COURTNEY CAMPBELL CAUSEWAY, #600 13 STREET ADDRESS **Tam**pa fl CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME KOHELER, DEBRA F 2.2 NAME 6200 COYRTNET CAMPBELL CAUSEWAY, #600 STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME **BOWERS. CHRISTOPER G** 3.2 NAME STREET ADDRESS 6200 COURTNEY CAMPBELL CAUSEWAY, #600 3.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME WELCH, GARY 4.2 NAME STREET ADDRESS 6200 COURTNEY CAMPBELL CAUSEWAY, #600 4.3 STREET ADDRESS CITY-ST-ZIP **Tam**pa fl 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

5.4 CITY-ST-ZIP

FILED May 15 1998 8:00am Secretary of State



14. I 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 suppliemental 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 of 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. Senior Vice President

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

☐ Change

Addition