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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90229 024 ***150.00

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DOCUMENT # P94000091342

1. Corporation Name

TWC EIGHTY-EIGHT DEVELOPMENT, INC.

Principal Place	of Business	Mailing Address						
6200 COURTNEY CAMPBELL CAUSEWAY 6200 COURTNEY			BELL CAUSEWAY					
SUITE 600		SUITE 600 TAMPA FL 33607			DO NOT WRITE IN THIS SPACE			
TAMPA FL 3360) (IAMPA FL 33007			3. Date Incorporated or Qualified			
					12/16/1994			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	1	opplied For	
21		26			59-3294759		lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	·	Additional	
22		27			J. Oblinions of Glades Beening	Fee F	Required	
City & State	9	City & State			6. Election Campaign Financing		May Be	
23				Trust Fund Contribution Added to Fees				
Zip	Country	Zip Country			8. This corporation owes the current year Intang			
24	25				Personal Property Tax. Yes No			
	9. Name and Address of Current	Registered Agent	- -	г	10. Name and Address of New Registered Ag	ent		
NA/II C	SON, JACK		81	Name				
	OON, JACK COURTNEY CAMPBELL CAUSE	MAV	82	82 Street Address (P.O. Box Number is Not Acceptable)				
		*A1	L					
SUITE 600			83				[
IAM	PA FL 33607		84	City		85 Zip	Code	
				•,	FL!	`		
11., Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes.	the abov	e-named co	orporation submits this statement for the purpose of ch ation's board of directors. I hereby accept the appointm	anging i	ts registered	
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change was autr ons of, Section 607.0505, Florid	iorized by a Statutes	the corpora	ation's board of directors. Thereby accept the appoint	ileill as i	egistorea	
SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age	nt signature req	uired when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	DPT	☐ DELETE	1.1 TITLE		L	Change	e ☐ Addition	
NAME	WILSON, JACK		1.2 NAME					
STREET ADDRESS	6200 COURTNEY CAMPBELL C	AUSEWAY, #600	1.3 STREE	FADDRESS			}	
CITY-ST-ZIP	TAMPA FL		1.4 CITY-S	T-ZIP				
TITLE	VS	☐ DELETE	2.1 TITLE	Ì	L	Change	Addition	
NAME	Koheler, Debra f		2.2 NAME					
STREET ADDRESS	6200 COYRTNET CAMPBELL CA	\USEWAY, #600	2.3 STREE	T ADDRESS				
CITY-ST-ZIP	TAMPA FL		2.4 CITY-	ST-ZIP				
TITLE	V	☐ DELETE	3.1 TITLE			Change	e ☐ Addition	
NAME	BOWERS, CHRISTOPER G	•	3.2 NAME				1	
STREET ADDRESS	6200 COURTNEY CAMPBELL C	AUSEWAY, #600	3.3 STREE	TADORESS				
CITY-ST-ZIP	TAMPA FL		3.4. CITY-	ST-ZIP				
TITLE	V	☐ DELETE	4.1 TITLE			Change	Addition	
NAME	WELCH, GARY		4. 2 NAME					
STREET ADDRESS	6200 COURTNEY CAMPBELL C	AUSEWAY, #600	4.3 STREE	TADDRESS				
CITY-ST-ZIP	TAMPA FL		4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME	Ì				
STREET ADORESS			5.3 STREE	TADDRESS			}	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			ļ	
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME			,		
STREET ADDRESS			6.3 STREE	T ADDRESS				
			6.4 CITY- S	1			,	
CITY-ST-ZIP	<u></u>		_		in Section 119.07/3Vi) Florida Statutes I further certifi		1 6	

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 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. Debra F. Koehler

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Daytime Phone #