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

PROFIT CORPORATION ANNUAL REPORT

1997

NAME

STREET ADDRESS

CHY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000013985 (3)

TWC NINETY DEVELOPMENT, INC.

Principal Place of Business Mailing Address 6200 COURTNEY CAMPBELL CAUSEWAY 6200 COURTNEY CAMPBELL 6 SUITE 600 SUITE 600 TAMPA FL 33607 TAMPA FL 33607				WAY		3. Date Incorporated or Qualified 3a. Date of Last Report				
						3. Date Incorporated or Qualified 02/20/1995	3a. Date 05/01/		aport	
2. Principal Place of Business 2a. Mailing A			loress			4. FEI Number	1 47/4 1/	Applied For		
21		26				59-3302707	59-3302707 Not Applicable			
Suite, Apt	t. #, etc.		Suite, Apt #, etc.			6. Certificate of Status Desired		\$8.75 Additional Fee Regulred		
City & Sta	ile	City & State	City & State			6 Classica Consolina Phonolog			· ```	
23	ne	28				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zφ	Country	Zip				8. This corporation has liability for intangible tax under s. 1				
24	25	29	30	ı		Florida Statutes				
	9. Name and Address of Curr	rent Registered Agent		[10. Name and Address of New Re	platered Age	ent		
WIL	SON, JACK			B1	Name					
6200 COURTNEY CAMPBELL CAUSEWAY				82	Street Addr	ess (P.O. Box Number is Not Acceptable)				
SUN	TE 600					obe (i .o. box itamber is its it to place				
TAM	IPA FL 33607			83						
				84	City		FL	85 Zip (Code	
office or agent. I. SIGNATURE	Signature, typod or printed name of registered					oration submits this statement for the p ion's board of directors. I hereby accep ad when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE			
TifLE			DELETE 1.11			1001101010111100010		Change	Addition	
NAME	WILSON, JACK			1.2 NAME						
STREET ADORESS	ANNA ACHIOTHELY ASSESSED	CAUSEWAY #600		1.3 STREET ADDRESS						
CHY-ST-ZIP	TAMPA FL 33607									
TITLE	VS	☐ DELE		1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition	
NAME	KOEHLER, DEBRA F.		2.2 N	AME				-		
STREET ADDRESS	AAAA AALINTAIRU AALINTAIL AALIATUUU AAAA			2 3 STREET ADDRESS						
C-TY - ST - ZIP	TAMPA 33 607			CITY-S	1					
THTLE	V DELE			3.1 TITLE			L	Change	Addition	
NAME	WELCH, GARY E.		3.2 N	AME					.]	
STREET ADDRESS	6200 COURTNEY CAMPBELL	. Causeway #600	3.3 S	TREET A	ADDRESS				İ	
CHY-ST-ZIP	TAMPA FL 33607		3.4. (CITY-S	T- ZI P					
TITLE	V	DELE	ETE 4.1 T	ITLE				Change	Addition	
NAME	BOWERS, CHRISTOPHER G.		4.21	VAME						
STREET ADDRESS	6200 COURTNEY CAMPBELL	. Causeway #600	4.3 S	TREET	ADDRESS					
CITY-S1-7IP				4.4 CITY+ST-ZIP		,				
TITLE		DELI	TE 51T	ITLE				Change	Addition	
NAME			5.2 N	IAME						
STREET ADDRESS	s 		5.3 \$	TREET	address					
CITY-S1-Z0F				ITY-ST	- ZIP					
TILLE		DELE	FTF 61T	ITLE	T			Change	Addition	

14. I do 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. SIGNATURE:

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED

May 15 1997 8:00am

Secretary of State

A DEMONSTRATION OF CONTRACTOR