

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90409 010 ***150.00

DOCUMENT # P97000077914

1. Entity Name
TWC NINETY-THREE, INC.



Principal Place of Business
655 NORTH FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602

Mailing Address
655 NORTH FRANKLIN STREET, SUITE 2200
SUITE 600
TAMPA, FL 33602

50012667



03142006 Chg-P CR2E034 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

6. Name and Address of Current Registered Agent

MCDONOUGH, BRIAN J
2200 MUSEUM TOWER
150 WEST FLAGLER ST
MIAMI, FL 33130

7. Name and Address of New Registered Agent

Name **BRENDA H. STOREY**
Street Address (P.O. Box Number is Not Acceptable)
655 N. FRANKLIN ST.
SUITE 2200
City **TAMPA** FL Zip Code **33602**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Brenda H. Storey*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-10-06
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME DPT
STREET ADDRESS WILSON, CAROLYN M
CITY-ST-ZIP 655 NORTH FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602

TITLE ☐ Delete
NAME CFOS
STREET ADDRESS STOREY, BRENDA H
CITY-ST-ZIP 655 NORTH FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Brenda H. Storey*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Brenda H. Storey
Chief Financial Officer

APR 10 2006 813-281-8888
Date Daytime Phone #