2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000002070

1. Entity Name

TWC SEVENTY-EIGHT, INC.



Principal Place of Business

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

655 NORTH FRANKLIN STREET, SUITE 2200 STE 600

TAMPA, FL 33602

FILED Apr 22, 2008 08:00 AN Secretary of State



03192008

No Chg-P

CR2E034 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

STOREY, BRENDA H 655 N FRANKLIN STREET, STE 2200 TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 **9.** Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees U00000914170 05/08/08-80045-019 150.00

10. OFFICERS AND DIRECTORS TITLE WILSON, CAROLYN M NAME STREET ADDRESS 655 NORTH FRANKLIN STREET, SUITE 2200 CITY-ST-ZIP TAMPA, FL 33602 TITLE STOREY, BRENDA H NAME 655 NORTH FRANKLIN STREET, SUITE 2200 STREET ADDRESS CITY-ST-7IP TAMPA, FL 33602 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Hurther 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING REFICER OR DIRECTOR

4-18-08

313-281-8888

Date

Daytime Phone #

Brenda H. Storey Chief Financial Officer