


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P98000092047</b> 1. Entity Name TWC SIXTY-SIX, INC.	
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Principal Place of Business 655 N FRANKLIN STREET STE 2200 TAMPA, FL 33602	Mailing Address 655 N FRANKLIN STREET STE 2200 TAMPA, FL 33602
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<b>DO NOT WRITE IN THIS SPACE</b>
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03192008 No Chg-P CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  STOREY, BRENDA H 655 N FRANKLIN ST STE 2200 TAMPA, FL 33602
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**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	05/09/08-80017-005 150.00
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DPT WILSON, CAROLYN M 6200 COURTNEY CAMPBELL CUASEWAY, STE. 600 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY- ST- ZIP	CFOS STOREY, BRENDA H 6200 COURTNEY CAMPBELL CSY STE 600 TAMPA, FL 33607
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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 4-18-08 813-281-8888  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**Brenda H. Storey**  
**Chief Financial Officer**