


**2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008**

DOCUMENT # A96000000414 1. Entity Name THE PIROFSKY FAMILY PARTNERSHIP CENTRAL PARK 2, LTD.	
---	---

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAR 31 PM 2:46

Principal Place of Business 5211 NW 110 AVENUE HOUSE CORAL SPRINGS FL 33076	Mailing Address 5211 NW 110 AVENUE HOUSE CORAL SPRINGS FL 33076
--	--



2. Principal Place of Business - No P.O. Box # 5211 N.W. 110 AVE Suite, Apt. #, etc. HOUSE	3. Mailing Address 5211 N.W. 110 AVE Suite, Apt. #, etc. HOUSE
---	---

1st MOORE CR2E003 (10/07)

City & State Coral Springs	City & State Coral Springs
Zip 33076 FL	Zip 33076 FL
Country Broward	Country Broward

4. FEI Number 65-0694413	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
--	---------------------------------------

6. Name and Address of Current Registered Agent PIROFSKY, NORMAN 5211 NW 110 AVENUE CORAL SPRINGS FL 33076	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--	---

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. Norman Pirofsky SIGNATURE Signature, typed or printed name of registered agent and title if applicable	3-28-08 DATE
--	------------------------

FILE NOW!!! Fee is \$500. * After May 1, 2008, fee will be \$900. *** Make check payable to Florida Department of State.**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
	PIROFSKY, NORMAN	CITY-ST-ZIP	
STREET ADDRESS	5211 NW 110 AVENUE		
CITY-ST-ZIP	CORAL SPRINGS FL 33076		
DOCUMENT #	NAME	STREET ADDRESS	
	PIROFSKY, ELAINE	CITY-ST-ZIP	
STREET ADDRESS	5211 NW 110 AVENUE		
CITY-ST-ZIP	CORAL SPRINGS FL 33076		
DOCUMENT #	NAME	STREET ADDRESS	
		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

800121412328
03/27/08--01001--026 **500.00

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Norman Pirofsky SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	3-28-08 Date	954-3456533 Office Phone
---	------------------------	------------------------------------

STAPLE CHECK HERE