2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A97000002021

1. Entity Name
TSCPR FAMILY PARTNERSHIP #2, LTD.



Principal Place of Business Mailing Address

5858 CENTRAL AVENUE ST. PETERSBURG, FL 33707

C/O THE SEMBLER COMPANY P.O. BOX 41847 ST. PETERSBURG, FL 33743-1847 FILED

07 APR 27 AM 8: 11

SECRETARY OF STATE . TALLAHASSEE, FLORIDA



03022007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3470770

ΒK

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SHER, CRAIG 5858 CENTRAL AVENUE ST. PETERSBURG, FL 33707

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statem	nent 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.			

DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00

GENERAL PARTNER INFORMATION

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
. STAPLE CHECK HERE	DOCUMENT /	P97000081031
	NAME	TSCPR FLORIDA, INC.
	STREET ADDRESS	5858 CENTRAL AVENUE
	CITY-ST-ZIP	ST. PETERSBURG, FL 33707
	DOCUMENT #	
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DO NOT WRITE IN THIS SPACE

ned with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information rate and the my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership execute the report as required by Chapter 620, Florida Statutes 14. I hereby certify that the information supp indicated on this report is true and ac-

SIGNATURE: _

TYPET OR PRINTED NAME OF SIGNING GENERAL PARTNER

H, SHER