

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

DOCUMENT # A99000000807	
1. Entity Name EPM #2, LTD.	



FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

08 MAR 20 AM 11:27

Principal Place of Business 800 W PLATT ST STE 2 TAMPA, FL 33606	Mailing Address 800 W PLATT ST STE 2 TAMPA, FL 33606
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2. Principal Place of Business - No P.O. Box # 1710 S. Dale Mabry	3. Mailing Address 1710 S. Dale Mabry
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Tampa, FL	City & State Tampa, FL
Zip 33629	Zip 33629
Country U.S.	Country U.S.



03132008 Chg-LP CR2E003 (12/06)

4. FEI Number 59-3622478		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent WILHERST DEVELOPERS INC. 800 W PLATT ST STE 2 TAMPA, FL 33606		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1710 S. Dale Mabry City Tampa FL Zip Code 33629

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: Mark K. Rosenfeld President, Wilherst Developers Inc 3-13-08  
 Signature, typed or printed name of registered agent and title if applicable. DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2008, Fee will be \$900.00**

**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 #	P96000101894	STREET ADDRESS	1710 S Dale Mabry
NAME	WILHERST DEVELOPERS, INC.	CITY-ST-ZIP	Tampa, FL 33629
STREET ADDRESS	800 W PLATT ST, STE 2		
CITY-ST-ZIP	TAMPA, FL 33606		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

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: Mark K. Rosenfeld 3-13-08 813-250-1717  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE