

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000319950

**Entity Name:** 175 E MAIN LLC

**Current Principal Place of Business:**

500 S. FLORIDA AVE.  
SUITE 300  
LAKELAND, FL 33801

**Current Mailing Address:**

PO BOX 3545  
LAKELAND, FL 33802 US

**FEI Number:** 87-1931419

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PUTNAM, ABEL A  
500 S. FLORIDA AVE.  
SUITE 300  
LAKELAND, FL 33801 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name PUTNAM, ABEL A  
Address 500 S. FLORIDA AVE., SUITE 300  
City-State-Zip: LAKELAND FL 33801

Title MANAGER  
Name TURNER, NEAL A  
Address 500 S. FLORIDA AVE.  
SUITE 300  
City-State-Zip: LAKELAND FL 33801

Title MANAGER  
Name PUTNAM, BENJAMIN L  
Address 500 S. FLORIDA AVE.  
SUITE 300  
City-State-Zip: LAKELAND FL 33801

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ABEL A. PUTNAM

**MGR**

**03/04/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date