## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

### **DOCUMENT # L02000007967**

1. Entity Name 2175, LLC



FILED Mar 17, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401

1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401



01172005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 01-0719625

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBERT LEE SHAPIRO, P.A. 2401 PGA BOULEVARD, SUITE 272 PALM BEACH GARDENS, FL 33410

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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.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE, Registered Agent signature required when reinstating)

DATE

#### Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BROCK, PETER 1551 FORUM PLACE, BLDG. 100 WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR SCHREIBER, ERIC 2060 SHAGLL CIR. WEST PALM BEACH, FL 33409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SCHREIBER, MARK 2060 SHAGLL CIR. WEST PALM BEACH, FL 33409
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	

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11. I hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and teaching 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 of trusted of powered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/14/05

S6-684-1540

Daytime Phon