

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # L99000005025 1. Entity Name XIRR INVESTMENTS PARTNERS, L.L.C.	
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Principal Place of Business 101 EAST KENNEDY BLVD, STE 3300 TAMPA, FL 33602	Mailing Address 101 EAST KENNEDY BLVD, STE 3300 TAMPA, FL 33602
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04262005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3592531	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JUNG, MING G
101 EAST KENNEDY BLVD., STE 3300
TAMPA, FL 33602

**DO NOT WRITE
IN THIS SPACE**

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**

U000000340160
04/28/05-80107-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SPURLIN-HORWITZ, ANGELA 6223 S. RUSSELL ST. TAMPA, FL 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CLAUDE, BRUNO ZOLLSTRASSE 42 PASTPACH CH-8021 ZURICH,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WINFREY, CHRISTOPHER L 197 BOULEVARD SAINT GERMAIN PARIS, FRANCE, 75007
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM XENICK, EMANUEL 3918 W. GRANADA ST. TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POLLOCK JR, GEORGE 5815 SIERRA CREST LITHIA, FL 33547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JUNG, MING G 643 ADDISON DRIVE NE SAINT PETERSBURG, FL 33716

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Angela Horwitz

4/26/2005 (813) 226-8844

Date

Daytime Phone #