2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000543

5500 CENEX DRIVE

City-St-Zip: INVER GROVE HEIGHTS, MN 55077

Address:

Entity Name: AGRILIANCE LLC

FILED Apr 12, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
5500 CEN INVER GR	EX DRIVE ROVE HEIGHT	S, MN 55077		
Current Mailing Address:			New Mailing Address:	
	4101 ARTMENT MS , MN 5516401			
FEI Number	: 41-1961003	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
1200 SOU	PORATION SY TH PINE ISLA ION, FL 33324	ND ROAD		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both
SIGNATUI	RE:			
	Electro	nic Signature of Registered Age	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	FIFE, JIM) Delete GTON AVENUE MN 55126	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	KNUTSON, DA	ON AVE. NORTH	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PALMQUIST, N 5500 CENEX D		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGR (BROWNE, RIC) Delete :K	Title: Name:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: DAN KNUTSON MGR 04/12/2007