## LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT #** A00000002068

1. Entity Name

The AG Center, LTD



FILED

2005 APR 18 PM 1: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## DO NOT WRITE IN THIS SPACE

			}		
2. Principal Place of Business	3. Mailing Address		DO NOT	WRITE IN THIS SPACE	
102 S. Waukesha St.	P. O. Box	657			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DU	E BY MAY 1	
City & State	City & State		4. FEI Number	Applied For	
Bonifay, FL	Bonifay, F	PL	59-3690437	Not Applical	
Zip Country Holmes	Zip 32425	Country Holmes	5. Certificate of Status Desir	ed   \$8.75 Additional Fee Required	
			7. Name and Address of Curr	rent Registered Agent	
DO NOT WRITE IN THIS SPACE		Name Hari	Harmon, Daniel, III Esq.		
		Street Address (P.O. Box Number is Not Acceptable) C/o Harmon & Stoan, P.A.			
		C/o Harmon & Stoan, P.A.			
		427 McKenzie Ave.			
		City	ama City EI	FL Zip Code 32401	
8. The above named entity submits this state	ment for the purpose of changing it	ts registered office or regis	ama City, FL	of Florida Lam familiar with and appar	
the obligations of registered agent	month of the perpose of changing in	to registered office of regis	sered agent, or both, in the state t	or ronda. I am familiar with, and accep	
SIGNATURE Signature, typed or printed name of register	ed agent and title if applicable.			DATE	
9. Capital Contributions	10. Amount of Cap		11. MAKE C	HECK PAYABLE TO FL. DEPT. OF STAT	
as Shown on record. 58,029	in FLORIDA to			PERSE SIDE FOR FEE INFORMATION	
A GENERAL PART	NER THAT IS A BUSINESS E	NTITY MUST BE REG	STERED AND ACTIVE WITH	THIS OFFICE.	
	ARTNER INFORMATION	the form, an amenum	ent must be med to change	a general partner.	
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NAME		STREET ADDRESS			
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