

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019949

FILED
Apr 08, 2011
Secretary of State

Entity Name: AGRICULTURAL RISK MANAGEMENT, LLC

Current Principal Place of Business:

14700 TROYER BROTHERS ROAD
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 303
ALVA, FL 33920 US

New Mailing Address:

14700 TROYER BROTHERS ROAD
FORT MYERS, FL 33913 US

FEI Number: 03-0479190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TROYER, AARON D
2200 TROYERS LANE
ALVA, FL 33920 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: TROYER, AARON D
Address: 2200 TROYERS LANE
City-St-Zip: ALVA, FL 33920 US

Title: AS
Name: BUDD, DAVID G
Address: 5551 RIDGEWOOD DR STE 501
City-St-Zip: NAPLES, FL 34103 US

Title: ST
Name: TROYER, AARON D
Address: 2200 TROYERS LANE
City-St-Zip: ALVA, FL 33920 US

I hereby 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.

SIGNATURE: DAVID G BUDD

AS

04/08/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date