## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## FILED Mar 20, 2008 08:00 A Secretary of State

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1. Entity Name

AG MANAGEMENT GROUP, LLC



Principal Place of Business

Mailing Address

6162 SEA GRASS LN NAPLES, FL 34116 US 6162 SEA GRASS LN NAPLES, FL 34116 US



03072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number			Applied For
20-1413097			Not Applicable
5. Certificate of Status Desired	1 1	\$5.00	Additional

6. Name and Address of Current Registered Agent

SILIC, QUENTIN 6162 SEA GRASS LN NAPLES, FL 34116

NAME STREET ADDRESS CITY-ST-ZIP

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	named entity submits this statement for the purpose of challions of registered agent.	nging its registered office or registered agent, or both	n, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE. Registered Agent signature required when reinstating)	DATE
FILE After May	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		-
NAME	SILIC, QUENTIN	,	
STREET ADDRESS CITY-ST-ZIP	6162 SEA GRASS LN NAPLES, FL 34116		•
	MBR		
TITLE NAME	TARP. JES	1	
STREET ADDRESS	1292 WALNUT DELL RD	· ·	U00000864747
CITY-ST-ZIP	PLATTEVILLE, WI 53818		04/04/08-80027-004 138.75
TITLE		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SNATURE: COO2 - QUENTA SILIC Mg 3.17-08 239-352-8939

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

Date

Deyline Phone #