


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000068370 1. Entity Name HAMILTON AG SERVICE, LLC		
Principal Place of Business 2210 JOHNSTON ROAD FORT PIERCE, FL 34951		Mailing Address 2210 JOHNSTON ROAD FORT PIERCE, FL 34951
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HAMILTON, MARK E 2210 JOHNSTON ROAD FORT PIERCE, FL 34951		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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HAMILTON, MARK E 2210 JOHNSTON ROAD FORT PIERCE, FL 34951	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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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.		
SIGNATURE: <u>Mark E. Hamilton</u> MARK HAMILTON		Date <u>3-15-07</u> Daytime Phone # <u>465-2917</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		



02122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 34-2017040	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

U00000670372
03/27/07-80110-004 50.00

**DO NOT WRITE
IN THIS SPACE**