2007 LIMITED LIABILITY COMPANY

FILED Apr 13, 2007 8:00 am Secretary of State

ANNUAL REPURI					Secretary of State			
DOCUMENT # L06000024013 1. Entity Name					04-13-2007 90	0034 033 ,	****50.	.00
TEX-AG	CONSULTANTS, LLC							
Principal Place	of Rusiness	Mailing Address	1	\dashv				
Principal Place of Business 604 INNWOOD DR.		604 INNWOOD DR.			•			
GEORGETOWN	N, TX 78628 US	GEORGETOWN, TX 786	528 US					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			00 010 0 0111 00 30 00 111 3 0110 1			IRI IN ICAN
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04092007	Chg-LLC	CR2E083	(12/06)	
City & State		City & State		4. FEI Numbe	- 442 105 7		 	olied For Applicable
Zip	Country	Zip	Country		of Status Desired		.00 Addi	tional
	6. Name and Address of Current F	Registered Agent		7. Name and	Address of New Re			,
COMPAD	TINA		Name					
CONRAD, TIM 2558 CANTERBURY DR S			Street Addres	s (P.O. Box Numb	er is Not Acceptable)			
WEST PAL	.M BEACH, FL 33407							
			City			FL	Zip Code	,
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office or regis	stered agent, or bo	th, in the State of Flor	ida. I am fami	iliar with, a	and accept
SIGNATURE .	ond of regional agent.							
SIGNATURE .								
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	E: Registered Agent signature requ	ired when reinstating)		DATE		
Fi D:	Signature, hyped or printed name of registered agent a ling Fee Is \$50.00 ue by May 1, 2007	nd title if applicable. (NOT	E: Registered Agent signature requ	ired when reinstating)		check paya Department		•
Fi Di	ling Fee is \$50.00		E: Registered Agent signature requ	iriad when reinstating)		check paya Department		•
9.	ling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBEI		· 10.	ired when reinstating)	Florida	check paya Department		Addition
9. TITLE NAME	ling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBEI MGRM CONRAD, GARY	RS/MANAGERS	· 10. TITLE NAME	ired when reinstating)	Florida	check paya Department	of State	
9.	ling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBEI	RS/MANAGERS	· 10.	ired when reinstating)	Florida	check paya Department	of State	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ired when reinstating)	Florida	check paya Department CHANGES	of State	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ired when reinstating)	Florida	check paya Department CHANGES	Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	wed when reinstating)	Florida	check paya Department CHANGES	Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MING Fee Is \$50.00 MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM GORGETOWN, TX 78628	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ired when reinstating)	Florida	check paya Department CHANGES	Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MING Fee Is \$50.00 MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY MGRM CONRAD, TIM	RS/MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	ired when reinstating)	Florida	check paya Department CHANGES	Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MING Fee Is \$50.00 MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM GORGETOWN, TX 78628	RS/MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	wed when reinstating)	Florida	check paya Department CHANGES	Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, TIM 2558 CANTERBURY DR. S.	RS/MANAGERS Delete Delete	TIPLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ired when reinstating)	Florida	check paya Department CHANGES	Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, TIM 2558 CANTERBURY DR. S.	RS/MANAGERS Delete Delete Delete	TIPLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ired when reinstating)	Florida	check paya Department CHANGES	Change Change Change	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, TIM 2558 CANTERBURY DR. S.	RS/MANAGERS Delete Delete Delete	TIPLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	wed when reinstating)	Florida	check paya Department CHANGES	Change Change Change	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, TIM 2558 CANTERBURY DR. S.	RS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ired when reinstating)	Florida	check paya Department CHANGES	Change Change Change	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, TIM 2558 CANTERBURY DR. S.	RS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ired when reinstating)	Florida	check paya Department CHANGES	Change Change Change	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, TIM 2558 CANTERBURY DR. S.	RS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ired when reinstating)	Florida	check paya Department CHANGES	Change Change Change	Addition Addition Addition
9. IITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	MANAGING MEMBER MGRM CONRAD, GARY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, KAY 604 INNWOOD DR GEORGETOWN, TX 78628 MGRM CONRAD, TIM 2558 CANTERBURY DR. S.	RS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ired when reinstating)	Florida	check paya Department CHANGES	Change Change Change	Addition Addition Addition

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.

CITY-ST-ZIP

CITY-ST-ZIP

513 · 869 · 1746

JRE: Kay CONTAL KAY CONRAD
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE