

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094336

FILED
Mar 02, 2009
Secretary of State

Entity Name: AG BIO TECH, LLC

Current Principal Place of Business:

1704 CORDELL DRIVE
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

1704 CORDELL DRIVE
TALLAHASSEE, FL 32303 US

New Mailing Address:

P.O. BOX 349
405 TIFT AVENUE
TIFTON, GA 31793 US

FEI Number: 26-0141179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAY, ROBERT L
1704 CORDELL DR
TALLAHASSEE, FL 32303 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: MGRM () Delete
Name: RAY, JAMES N
Address: 4008 BETTIAN AV
City-St-Zip: MILTON, FL 32583 US

Title: MGRM () Delete
Name: HOLMES, JOEL
Address: 409 E 6TH ST
City-St-Zip: ADEL, GA 32620 US

Title: MGRM () Delete
Name: JUYOUNG, KIM
Address: 2021 ASCOT WAY
City-St-Zip: TALLAHASSEE, FL 32312 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JAMES N RAY

MGRM

03/02/2009

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