

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M99000000970

FILED  
Apr 16, 2002 8:00 AM  
Secretary of State

Entity Name: AGRO DISTRIBUTION, LLC

## Current Principal Place of Business:

5500 CENEX DRIVE  
INVER GROVE HEIGHTS, MN 55077

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 64101  
MS 2500  
ST. PAUL, MN 551640101

## New Mailing Address:

FEI Number: 41-1941923      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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/MEMBERS:

Title: MGRM ( ) Delete  
Name: WESTBROCK, LEON  
Address: 5500 CENEX DRIVE  
City-St-Zip: INVER GROVE HEIGHTS, MN 55077

Title: MGRM ( ) Delete  
Name: HALVERSON, DUANE  
Address: 1275 RED FOX ROAD  
City-St-Zip: ARDEN HILLS, MN 55112

Title: MGRM ( ) Delete  
Name: HONSE, ROBERT  
Address: 5500 CENEX DRIVE  
City-St-Zip: INVER GROVE HEIGHTS, MN 55077

Title: MGRM ( ) Delete  
Name: GHERTY, JOHN E  
Address: 4001 LEXINGTON AVENUE NORTH  
City-St-Zip: ARDEN HILLS, MN 551122921

## ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change ( ) Addition  
Name: HONSE, ROBERT  
Address: 3315 NORTH OAK TRAFFICWAY  
City-St-Zip: KANSAS CITY, MO 64116

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DUANE HALVERSON

MGRM

04/16/2002

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