

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000097071

**Entity Name:** AG APPLICATIONS LLC.

**Current Principal Place of Business:**

380 AVENUE C SW  
WINTER HAVEN, FL 33880

**Current Mailing Address:**

PO BOX 1662  
WINTER HAVEN, FL 33882

**FEI Number:** 45-3051599

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BOWEN, TYLER R  
220 WHITMAN RD  
WINTER HAVEN, FL 33884 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name BOWEN, TYLER R  
Address 220 WHITMAN RD  
City-State-Zip: WINTER HAVEN FL 33884

Title MGRM  
Name PHARES, BRADLEY J  
Address 3421 LAKEVIEW DRIVE  
City-State-Zip: WINTER HAVEN FL 33884

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TYLER BOWEN

**MGR**

**04/30/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date