

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000209845

**Entity Name:** AGRI-DEF, LLC

**Current Principal Place of Business:**

334 OLD TOWN CREEK RD  
ZOLFO SPRINGS, FL 33890

**Current Mailing Address:**

334 OLD TOWN CREEK RD  
ZOLFO SPRINGS, FL 33890 US

**FEI Number:** 81-4433064

**Certificate of Status Desired:** No

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

WEBER, TIMOTHY W  
5453 CENTRAL AVENUE  
ST. PETERSBURG, FL 33710 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 DUNCAN, JUSTIN H  
Address 386 OLD TOWN CREEK RD  
City-State-Zip: ZOLFO SPRINGS FL 33890

Title MGRM  
Name DUNCAN, CHRISTINA A  
Address 334 OLD TOWN CREEK RD  
City-State-Zip: ZOLFO SPRINGS FL 33890

*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:** CHRISTINA ANN DUNCAN

**MGRM**

**01/31/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date