2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 841545

Entity Name: E. & J. GALLO WINERY, INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
600 YOSEM MODESTO,	IITE BLVD CA 95354276	0			
Current Mailing Address:			New Mailing Address:		
	IITE BLVD RPORATE TAX CA 95354276				
FEI Number:	94-1009696	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VT () E YOUGA, ANTHON 816 COBBLESTO MODESTO, CA	DNE CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VS () E BEAL, RICHARD 2501 HARCOURT MODESTO, CA	AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COPD () E GALLO, JOSEPH 891 S. HOPPER MODESTO, CA		Title: Name: Address: City-St-Zip:	COPD (X) Change () Addition GALLO, JOSEPH E 891 S. HOPPER ROAD MODESTO, CA	
Title: Name: Address: City-St-Zip:	COPD () E COLEMAN, JAME 2702 SCENIC BE MODESTO, CALI	ES E, IND	Title: Name: Address: City-St-Zip:	COPD (X) Change () Addition COLEMAN, JAMES E 2702 SCENIC BEND MODESTO, CA	
Title: Name: Address: City-St-Zip:	COPD () E GALLO, ROBERT 1716 MAZE ROA MODESTO, CALI	D	Title: Name: Address: City-St-Zip:	COPD (X) Change () Addition GALLO, ROBERT J 1716 MAZE RD MODESTO, CA	
Title: Name: Address: City-St-Zip:	V () E DOTY, ALLEN 7301 SPY GLASS MODESTO, CA		Title: Name: Address: City-St-Zip:	() Change () Addition	

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN DOTY V 04/14/2005