

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003617

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: MAURITSON FAMILY WINERY, INC.

## Current Principal Place of Business:

2859 DRY CREEK ROAD  
HEALDSBURG, CA 95448

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 2068  
HEALDSBURG, CA 95448

## New Mailing Address:

FEI Number: 68-0454696      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARKIN, ROBERT  
2014 SE 14TH TERRACE  
DEERFIELD BEACH, FL 33441      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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title:            D            ( ) Delete  
Name:            LARKIN, ROBERT  
Address:        1014 SE 14TH TERRACE  
City-St-Zip:    DEERFIELD BEACH, FL 33441

Title:            ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:            ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:            PRES            (X) Change ( ) Addition  
Name:            MAURITSON, THOMAS M  
Address:        2305 LYTTON SPRINGS ROAD  
City-St-Zip:    HEALDSBURG, CA 95448

Title:            SEC/            ( ) Change (X) Addition  
Name:            MAURITSON, CLAYTON M  
Address:        2263 LYTTON SPRINGS ROAD  
City-St-Zip:    HEALDSBURG, CA 95448

Title:            DIR.            ( ) Change (X) Addition  
Name:            MAURITSON, LINDA K  
Address:        271 OAK TREE DR.  
City-St-Zip:    SANTA ROSA, CA 95401

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 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: CLAYTON MAURITSON

SEC/

02/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date