

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002746

FILED
Apr 15, 2004
Secretary of State

Entity Name: ANDERSON'S CONN VALLEY WINERY, INC.

Current Principal Place of Business:

680 ROSSI RD
ST HELENA, CA 94574

New Principal Place of Business:

Current Mailing Address:

680 ROSSI RD
ST HELENA, CA 94574

New Mailing Address:

FEI Number: 94-2883069 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYES ST STE 105
TALLAHASSEE, FL 32301 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: VC () Delete
Name: ANDERSON, TODD
Address: 2624 COLOMBARD CT
City-St-Zip: ST HELENA, CA 94574

Title: D () Delete
Name: ANDERSON, DANA
Address: 2624 COLOMBARD COURT
City-St-Zip: ST HELENA, CA 94574

Title: S () Delete
Name: ANDERSON, PHYLLIS
Address: 680 ROSSI RD
City-St-Zip: ST HELENA, CA 94574

Title: C () Delete
Name: ANDERSON, GUS
Address: 680 ROSSI RD
City-St-Zip: ST HELENA, CA 94574

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: TODD ANDERSON

VC

04/15/2004

Electronic Signature of Signing Officer or Director

_____ Date