

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001482

Entity Name: CODORNIU NAPA, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

1345 HENRY ROAD
NAPA, CA 94559

New Principal Place of Business:

Current Mailing Address:

1345 HENRY ROAD
NAPA, CA 94559

New Mailing Address:

FEI Number: 94-3074046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUGHERTY, JOHN
354 CYPRESS DR
STE 6
JUPITER, FL 33469 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: P () Delete
Name: KENTON, MICHAEL
Address: 19185 SEVENTH ST E
City-St-Zip: SONOMA, CA 95476

Title: V () Delete
Name: PAGES, XAVIER
Address: PGE. FONTANELLES #9, 08017
City-St-Zip: BARCELONA, SPAIN,

Title: S () Delete
Name: GILBRETH, DAVID
Address: 1022 ROSS CIRCLE
City-St-Zip: NAPA, CA 94558

Title: COB () Delete
Name: RAVENTOS, MARIA M
Address: PAU ALCOVER, 37
City-St-Zip: BARCELONA, SPAIN, 08017

Title: VP () Delete
Name: FARRE, XAVIER
Address: FINCA DONA LOLA
City-St-Zip: RAIMAT, SPAIN, 25111

Title: T () Delete
Name: O'LEARY, TIM
Address: 1109 HUDSON AVE
City-St-Zip: SAINT 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:

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

Title: T (X) Change () Addition
Name: O'LEARY, TIMOTHY
Address: 1109 HUDSON AVE
City-St-Zip: SAINT HELENA, CA 94574

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: TIMOTHY O'LEARY

Electronic Signature of Signing Officer or Director

T

04/30/2007

Date