


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # M98000000918

1. Entity Name
MARTIN WEYRICH WINERY, LLC



Principal Place of Business 4230 BUENA VISTA DRIVE PASO ROBLES, CA 93446	Mailing Address P.O. BOX 7003 PASO ROBLES, CA 93447-7003
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DO NOT WRITE IN THIS SPACE

01052004 No Chg-LLC CR2E083 (10/03)

4. FEI Number **77-0487402** Applied For Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**ACIREALE, GIANNI
 1217 LAKE BAY COURT
 WINTER GARDEN, FL 34787**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
 Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEYRICH, DAVID B 2550 CRESTON RIDGE RD. PASO ROBLES, CA 93446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM WEYRICH, MARY T 2550 CRESTON RIDGE RD. PASO ROBLES, CA 93446
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 01/22/04-80015-016 55.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: David B. Weyrich **01/06/04** **805/238-9234**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #
David B. Weyrich, Managing Member