

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 23, 2009  
Secretary of State**

DOCUMENT# P05000000226

Entity Name: PINE RIDGE VINEYARD, INC.

**Current Principal Place of Business:**

2423 S. ROCKCRUSHER RD.  
HOMASASSA, FL 34448 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1750  
LECANTO, FL 34460 US

**New Mailing Address:**

FEI Number: 20-2113972      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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

**OFFICERS AND DIRECTORS:**

Title: D            ( ) Delete  
Name: ASCOLILLO, FRANCIS A  
Address: 6320 WEST PINE RIDGE BLVD  
City-St-Zip: BEVERLY HILLS, FL 34465 US

Title: D            ( ) Delete  
Name: ASCOLILLO, CAROL  
Address: 6320 WEST PINE RIDGE BLVD  
City-St-Zip: BEVERLY HILLS, FL 34465 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: O            (X) Change ( ) Addition  
Name: ALEXANDER, CAROLANN  
Address: 6320 WEST PINE RIDGE BLVD  
City-St-Zip: BEVERLY HILLS, FL 34465 US

Title: D O            (X) Change ( ) Addition  
Name: ASCOLILLO, CAROL  
Address: 6320 WEST PINE RIDGE BLVD  
City-St-Zip: BEVERLY HILLS, FL 34465 US

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: CAROLANN A. ALEXANDER

PRES

04/23/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date