

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14011

FILED
Apr 11, 2011
Secretary of State

Entity Name: CONSTELLATION BRANDS, INC.

Current Principal Place of Business:

207 HIGH POINT DRIVE
BUILDING 100
VICTOR, NY 14564 US

New Principal Place of Business:

Current Mailing Address:

207 HIGH POINT DRIVE
BUILDING 100
VICTOR, NY 14564 US

New Mailing Address:

FEI Number: 16-0716709 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: C/D
Name: SANDS, RICHARD
Address: 207 HIGH POINT DRIVE, BUILDING 100
City-St-Zip: VICTOR, NY 14564 US

Title: EOPD
Name: SANDS, ROBERT S
Address: 207 HIGH POINT DRIVE, BUILDING 100
City-St-Zip: VICTOR, NY 14564 US

Title: CFO
Name: RYDER, ROBERT
Address: 207 HIGH POINT DRIVE, BUILDING 100
City-St-Zip: VICTOR, NY 14564 US

Title: VPAS
Name: LAVERDI, BARBARA J
Address: 207 HIGH POINT DRIVE, BUILDING 100
City-St-Zip: VICTOR, NY 14564 US

Title: SVP
Name: HUMPHREY, PERRY R
Address: 207 HIGH POINT DRIVE, BUILDING 100
City-St-Zip: VICTOR, NY 14564 US

Title: SVPS
Name: SORCE, DAVID S
Address: 207 HIGH POINT DRIVE, BUILDING 100
City-St-Zip: VICTOR, NY 14564 US

I hereby 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 all other like empowered.

SIGNATURE: BARBARA J. LAVERDI

VPAS

04/11/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date