2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F1800000938

Entity Name: CHAPPELLET WINERY, INC.

Current Principal Place of Business:

1581 SAGE CANYON RD ST. HELENA, CA 94574

Current Mailing Address:

1581 SAGE CANYON RD ST. HELENA. CA 94574

FEI Number: 94-2681414

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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: KATHERINE SCHNEIDER, ASSISTANT SECRETARY

SIGNATURE	KATHERINE SCHNEIDER, ASSISTANT SECRETARY			04/05/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT, DIRECTOR	Title	SECRETARY, DIRECTOR	
Name	CHAPPELLET, CYRIL SCOTT	Name	CHAPPELLET, CARISSA	
Address	1581 SAGE CANYON RD	Address	1581 SAGE CANYON RD	
City-State-Zip:	ST. HELENA CA 94574	City-State-Zip:	ST. HELENA CA 94574	
Title	DIRECTOR	Title	DIRECTOR	
Name	CHAPPELLET FLAGER, ALEXA	Name	CHAPPELLET, LYGIA	
Address	1581 SAGE CANYON RD	Address	1581 SAGE CANYON RD	
City-State-Zip:	ST. HELENA CA 94574	City-State-Zip:	ST. HELENA CA 94574	
Title	DIRECTOR	Title	VP, DIRECTOR	
Name	CHAPPELLET, MARY ALYCE	Name	CHAPPELLET, DOMINIC	
Address	1581 SAGE CANYON RD	Address	1581 SAGE CANYON RD	
City-State-Zip:	ST. HELENA CA 94574	City-State-Zip:	ST. HELENA CA 94574	
Title	DIRECTOR			
Name	DANIELS, JACK			
Address	1581 SAGE CANYON RD			

City-State-Zip: ST. HELENA CA 94574

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: CYRIL SCOTT CHAPPELLET

PRESIDENT

04/05/2024

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date