2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#715729

FILED Mar 12, 2007 Secretary of State

Current Principal Place of Business: 215 S MONROE ST STE 800-A TALLAHASSEE, FL 32301 US Current Mailing Address: 215 S MONROE ST STE 800-A TALLAHASSEE, FL 32301 US Current Mailing Address: 215 S MONROE ST STE 800-A TALLAHASSEE, FL 32301 US FEI Number 23-7002435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCOTT, ASHLEY T 215 S. MONROE ST 800-A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent	Entity Na	IME: DISTILLED SPIRITS WHOLESALERS O	F FLORIDA EDUCATIONAL FO	DUNDATION, INC.
STE 800-A TALLAHASSEE, FL 32301 US Current Mailing Address: 215 S MONROE ST STE 800-A TALLAHASSEE, FL 32301 US FEI Number Stere 800-A TALLAHASSEE, FL 32301 US FEI Number 23-7002435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCOTT, ASHLEY T 215 S. MONROE ST 800-A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: D () Delete Name: CRISSES, ANDREW M Alame: Address: City-St-Zip: NEW YORK, NY City-St-Zip: NEW YORK, NY City-St-Zip: NEW YORK, NY Title: D () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: PT () Delete Title: () Change () Addition Name: Address: City-St-Zip: Title: PT () Delete Title: () Change () Addition Name: ASHLEY, SCOTT T Name: Address: 215 S. MONROE ST., 800-A Address: 215 S. MONROE ST., 800-A	Current F	Principal Place of Business:	New Principal Place	of Business:
215 S MONROE ST STE 800-A TALLAHASSEE, FL 32301 US FEI Number: 23-7002435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: SCOTT, ASHLEY T 215 S. MONROE ST 800-A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title:	STE 800- <i>i</i>	A		
STE 800-A TALLAHASSEE, FL 32301 US FEI Number: 23-7002435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCOTT, ASHLEY T 215 S. MONROE ST 800-A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: D () Delete Title: () Change () Addition Name: Address: 805 THIRD AVENUE Address: 01ty-St-Zip: Title: D () Delete Title: () Change () Addition Name: ROSENBERG JERRY NAME	Current N	Mailing Address:	New Mailing Addres	s:
Name and Address of Current Registered Agent: SCOTT, ASHLEY T 215 S. MONROE ST 800-A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date	STE 800-	A		
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In the State of Florida. SIGNATURE:	215 S. MC TALLAHA	DNROE ST 800-A ISSEE, FL 32301 US	urnoso of changing its registers	d office or registered agent, or both
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: Title: D () Delete Name: CRISSES, ANDREW M Address: 805 THIRD AVENUE City-St-Zip: NEW YORK, NY Title: D () Delete Title: () Change () Addition Name: Address: () Change () Addition Name: () Change () Addition Name: ROSENBERG, JERRY Name: ROSENBERG, JERRY Address: P.O. BOX 44127 City-St-Zip: ATLANTA, GA 303361127 Title: PT () Delete Title: () Change () Addition Name: Address: () Change () Addition Name: Address: () City-St-Zip: () City-St-Zip: () City-St-Zip: () City-St-Zip: () Change () Addition Name: ASHLEY, SCOTT T Name: Address: 215 S. MONROE ST., 800-A			urpose of changing its registere	a office of registered agent, or both,
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	Name:	()		() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT T. ASHLEY PT 03/12/2007