

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 737719

FILED
Oct 05, 2009
Secretary of State

Entity Name: WINE AND SPIRITS DISTRIBUTORS OF FLORIDA, INC.

Current Principal Place of Business:

215 S MONROE STREET
800 A
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

215 S MONROE ST
800 A
TALLAHASSEE, FL 32301 US

New Mailing Address:

215 S MONROE STREET
800 A
TALLAHASSEE, FL 32301 US

FEI Number: 59-0547120 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ASHLEY, SCOTT T
215 S MONROE ST
800 A
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: SCOTT T. ASHLEY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ASHLEY, SCOTT T
Address: 215 S MONROE ST # 800 A
City-St-Zip: TALLAHASSEE, FL 32301

Title: SD () Delete
Name: DRINON, BOB
Address: 3700 COMMERCE PKWY
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: ROSENBERG, HERBERT J
Address: ONE NATIONAL DR SW
City-St-Zip: ATLANTA, GA 30336

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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

Electronic Signature of Signing Officer or Director

PTD

10/05/2009

Date