

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737719

**FILED**  
**Jan 05, 2012**  
**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 STREET  
800 A  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

**FEI Number:** 59-0547120

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

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

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

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

Title: D  
Name: POWER, STEPHEN  
Address: 2900 S.W. 149TH AVE. SUITE 300  
City-St-Zip: MIRAMAR, FL 33027

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT T. ASHLEY

PT

01/05/2012

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

\_\_\_\_\_  
Date