

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 823398

FILED
Jan 29, 2009
Secretary of State

Entity Name: HEAVEN HILL DISTILLERIES, INC.

Current Principal Place of Business:

P.O.BOX 729
HIGHWAY #49 1 1/2 MILES S E
BARDSTOWN, KY 40004

New Principal Place of Business:

HIGHWAY #49 1 1/2 MILES S E
BARDSTOWN, KY 40004

Current Mailing Address:

P.O.BOX 729
HIGHWAY #49 1 1/2 MILES S E
BARDSTOWN, KY 40004

New Mailing Address:

P O BOX 729
BARDSTOWN, KY 40004

FEI Number: 61-0402960

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PREFERRED BEVERAGE MARKETING, INC.
2684 NW 48TH STREET
BOCA RATON, FL 33434 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: PULLIAM, H. MARK,
Address: 121 CAMBRON DR
City-St-Zip: BARDSTOWN, KY

Title: V () Delete
Name: HOBBS, DAVID M.,
Address: 1105 POPLAR FLAT RD
City-St-Zip: BARDSTOWN, KY

Title: VD () Delete
Name: SHAPIRA, HARRY,
Address: 1058 ALTA VISTA ROAD
City-St-Zip: LOUISVILLE, KY 0,

Title: P () Delete
Name: SHAPIRA, MAX L,
Address: 4106 WOODSTONE WAY
City-St-Zip: LOUISVILLE, KY 40241

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:

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

SIGNATURE: H MARK PULLIAM

V

01/29/2009

Electronic Signature of Signing Officer or Director

_____ Date