2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 856259

Entity Name: VINEYARD BRANDS, INC.

FILED May 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2000 RESOURCE DRIVE BIRMINGHAM, AL 35242 US **Current Mailing Address: New Mailing Address:** 2000 RESOURCE DRIVE BIRMINGHAM, AL 35242 US FEI Number: 94-2217504 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: MATSON, FREDDY 3632 JAFFA DR SARASOTA, FL 34239 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition FABRE, HUBERT Name: Name: 78 ARBOLEDA LANE Address: Address: City-St-Zip: CARMEL VALLEY, CA 93924 City-St-Zip: Title: SVPS Title: () Delete () Change () Addition CASSAVOY, ROBERT S Name: Name: 1203 GREYSTONE CREST Address: Address: BIRMINGHAM, AL 35242 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition MARSHALL, CHRIS Name: Name: 70 SPRING STREET Address: Address: City-St-Zip: WRENTHAM, MA 02093 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition HAAS, DANIEL E Name: Name: Address: 1243 'C' STREET SE Address: City-St-Zip: WASHINGTON, DC 20003 City-St-Zip: Title: PD Title: () Delete () Change () Addition NEFF, JERRY L Name: Name: 3883 LOCKERBIE DR Address: Address: City-St-Zip: BIRMINGHAM, AL 35233 City-St-Zip: Title: () Delete Title: () Change () Addition PETROW, JAN Name: Name: 13 ORCHARD Address: Address: City-St-Zip: City-St-Zip: KATONAH, NY 10536

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: ROBERT S. CASSAVOY SVPS 05/18/2009