

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # A28302

1. Entity Name
BIANCHI VINEYARDS, A CALIFORNIA LIMITED PARTNERSHIP



Principal Place of Business
**3380 BRANCH ROAD
PASO ROBLES, CA 93446**

Mailing Address
**3380 BRANCH ROAD
PASO ROBLES, CA 93446**



02132006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
95-2283088

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MOSKOWITZ, DAVID
11420 N. KENDALL DR., STE. 108
MIAMI, FL 33176**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

DATE _____

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**BIANCHI, GLENN A.
30 EMERALD BAY
LAGUNA BEACH, CA 92651**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**RANSOM, DONALD J.
19450 SINGING HILLS DR.
NORTHRIDGE, CA**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
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CITY - ST - ZIP

DOCUMENT #
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STREET ADDRESS
CITY - ST - ZIP

U00000554351
05/15/06-80089-003 500.00

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04-24-06

Date

Daytime Phone #