

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**

**06 MAY 31 AM 9:25**

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**DOCUMENT # B97000000416**

1. Entity Name  
**J VINEYARDS AND WINERY LP**



Principal Place of Business  
**11447 OLD REDWOOD HWY.  
HEALDSBURG, CA 95448**

Mailing Address  
**P.O. BOX 6009  
HEALDSBURG, CA 95448**

**DO NOT WRITE IN THIS SPACE**



03222006 No Chg-LP

CR2E003 (11/05)

4. FEI Number  
**68-0441064**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**GOLDEN, DEBORAH L  
1420 VENETIA AVENUE  
CORAL GABLES, FL 33134-2260**

**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.

**800075662608**  
**06/02/06--01011--015 \*\*508.75**  
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 # **F00000001057**  
NAME **J.L. JORDAN COMPANY**  
STREET ADDRESS **11447 OLD REDWOOD HWY.**  
CITY-ST-ZIP **HEALDSBURG, CA 95448**

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IN THIS SPACE**

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**

**3-29-06**

Date

**707-431-5223**

Daytime Phone #

STATE CHECK HERE