

**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 <input checked="" type="checkbox"/>	<b>\$8.75</b> 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 \_\_\_\_\_

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
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

STATE 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:** *Jordan Jordan* 3-29-06 707-431-5223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #