

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000471

FILED
Jan 14, 2005
Secretary of State

Entity Name: RAMEY WINE CELLARS, INC.

Current Principal Place of Business:

1784 WARM SPRINGS RD.
GLEN ELLEN, CA 95442

New Principal Place of Business:

Current Mailing Address:

PO BOX 1922
GLEN ELLEN, CA 954421922

New Mailing Address:

FEI Number: 68-0481267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRY, CONNIE
9801 PREMIER PARKWAY
MIRAMAR, FL 33025 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: P () Delete
Name: RAMEY, DAVID
Address: 1784 WARM SPRINGS RD
City-St-Zip: GLEN ELLEN, CA

Title: S () Delete
Name: RAMEY, CARLA
Address: 1784 WARM SPRINGS RD
City-St-Zip: GLEN ELLEN, CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAMEY, DAVID
Address: 1784 WARM SPRINGS RD
City-St-Zip: GLEN ELLEN, CA 95442

Title: S (X) Change () Addition
Name: RAMEY, CARLA
Address: 1784 WARM SPRINGS RD
City-St-Zip: GLEN ELLEN, CA 95442

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLA RAMEY

S

01/14/2005

Electronic Signature of Signing Officer or Director

Date