2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003262

Title:

Name: Address:

City-St-Zip:

FILED Jun 24, 2009 Secretary of State

Entity Name: M2 VINTNERS, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** 1376 EAST TURNER ROAD, #D LODI, CA 95240 **Current Mailing Address: New Mailing Address:** 1376 EAST TURNER ROAD, #D LODI, CA 95240 FEI Number: 72-1582193 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: VALOIS, NED 5830 SW 82ND ST MIAMI, FL 33143 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 Title: (X) Change () Addition MATHENY, CHRIS Name: Name: MONTGOMERY, LAYNE 7980 KELVEDON WAY 9012 ERLE BLUNDEN WAY Address: Address: City-St-Zip: SACRAMENTO, CA 95829 City-St-Zip: FAIR OAKS, CA 95628 Title: VC Title: (X) Change () Addition () Delete WOODRUFF, TERRY Name: MONTGOMERY, LAYNE Name: 9012 ERLE BLUNDEN WAY 1915 DICOVERY VILLAGE LN Address: Address: GOLD RIVER, CA 95760 City-St-Zip: FAIR OAKS, CA 95628 City-St-Zip: Title: (X) Change () Addition () Delete Title: CFO MATHENY, DIANA WOODRUFF, TED Name: Name: 7980 KELVEDON WAY 1376 E. TURNER ROAD, #D Address: Address: City-St-Zip: SACRAMENTO, CA 95829 City-St-Zip: LODI, CA 95240

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LAYNE MONTGOMERY COO 06/24/2009

() Delete

MONTGOMERY, KAREN

FAIR OAKS, CA 95628

9012 ERL BLUNDEN WAY

() Change () Addition