

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**

**Feb 11 1998 8:00am  
Secretary of State**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

PROFIT CORPORATION ANNUAL REPORT 1998

**DOCUMENT # F93000001920 (8)**

1. Corporation Name  
**HANZELL VINEYARDS, LTD. CORPORATION**



Principal Place of Business: **18598 LOMITA AVE. SONOMA CA 95478**  
Mailing Address: **18598 LOMITA AVE. SONOMA CA 95478**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>04/21/1993</b>	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number <b>94-2280007</b>	Applied For <input type="checkbox"/> Not Applicable
23. Zip	24. Country	28. Zip	29. Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
25. Country		30. Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**LEVEQUE, PATRIK  
2210 NW 29 ST  
FT LAUDERDALE FL 33311**

81 Name **AUGUSTAN WINE IMPORTS**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1928 TIGERTAIL BLVD # 2**  
83  
84 City **DANIA** FL 85 Zip Code **33004**

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **CONSTANCE MIELOS PERCY** 2/18/98 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>DT</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DOBSON, T S</b>	1.2 NAME	
STREET ADDRESS	<b>407 8TH AVE., SW. #406</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CALGARY, ALBERTA, CANADA</b>	1.4 CITY-ST-ZIP	
TITLE	<b>P</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SESSIONS, ROBERT</b>	2.2 NAME	
STREET ADDRESS	<b>18598 LOMITA AVE.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SONOMA CA</b>	2.4 CITY-ST-ZIP	
TITLE	<b>C</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BRITTON, WILLIAM L</b>	3.2 NAME	
STREET ADDRESS	<b>855 2ND ST SW 4500 BANKERS HALL EAST</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CALGARY ALBERTA CA</b>	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **ATTY-IN-FACT** 1/12/98 707.996.3860

CR2E034 (10/97)