

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001920

FILED  
Feb 29, 2008  
Secretary of State

Entity Name: HANZELL VINEYARDS, LTD. CORPORATION

**Current Principal Place of Business:**

18596 LOMITA AVE.  
SONOMA, CA 95476

**New Principal Place of Business:**

**Current Mailing Address:**

18596 LOMITA AVE.  
SONOMA, CA 95476

**New Mailing Address:**

FEI Number: 94-2280007      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TRANSATLANTIC WINE & SPIRITS  
1600 NW 163 STREET  
MIAMI, FL 33169 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: D ( ) Delete  
Name: BRITTON, WILLIAM L  
Address: 855 2ND ST SW 4500 BANKERS HALL EAST  
City-St-Zip: CALGARY ALBERTA, CA CA

Title: P ( ) Delete  
Name: ARNOLD, JEAN L  
Address: 4898 GROVE STREET  
City-St-Zip: SONOMA, CA 95476 US

Title: D ( ) Delete  
Name: ALEXANDER, DE BRYE  
Address: 18596 LOMITA AVE  
City-St-Zip: SONOMA, CA 95476 US

Title: D ( ) Delete  
Name: MOTTO, VIC  
Address: 1715 DEAN YORK LANE  
City-St-Zip: ST HELENA, CA 94574 US

Title: D ( ) Delete  
Name: FREDRICKSON, JON  
Address: 231 WARE ROAD  
City-St-Zip: WOODSIDE, CA 94062 US

Title: D ( ) Delete  
Name: ROBERT, SESSIONS  
Address: 4898 GROVE STREET  
City-St-Zip: SONOMA, CA 95476 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: BRITTON, WILLIAM L  
Address: 1400 - 1600 909 11TH AVE SW  
City-St-Zip: CALGARY ALBERTA, BC T2R 1N6 CA

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JEAN L. ARNOLD

P

02/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date