

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90056 035 ***158.75

DOCUMENT # F94000000745

1. Corporation Name
ROBERT MONDAVI INVESTMENTS, INC.



Principal Place of Business
P.O. BOX 106
OAKVILLE CA 94562

Mailing Address
P.O. BOX 106
OAKVILLE CA 94562

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

02/16/1994

4. FEI Number

68-0248575

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOND, WILLIAM J
12018 DUNMORE COURT
ORLANDO FL 32821

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D ☐ DELETE

1.1 TITLE

☐ Change ☐ Addition

MONDAVI, R M
5593 SILVERADO TRAIL
NAPA CA

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE

D ☐ DELETE

2.1 TITLE

☐ Change ☐ Addition

MONDAVI, TIMOTHY J
5645 SILVERADO TRAIL
NAPA CA

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE

D ☐ DELETE

3.1 TITLE

☐ Change ☐ Addition

BORGER, MARCIA M
130 EAST END AVENUE
NEW YORK NY

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE

☐ DELETE

4.1 TITLE

☐ Change ☐ Addition

EVANS, GREGORY M
3150 BROWNS VALLEY RD.
NAPA CA

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE

V ☐ DELETE

5.1 TITLE

☐ Change ☐ Addition

MATTEI, PETE
30 GOLDEN GATE CIRCLE
NAPA CA

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE

☐ DELETE

6.1 TITLE

☐ Change ☒ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

T
Garcia, Raymond L, Jr.
175 Mund Rd.
St Helena, CA 94574

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-99

Date

(707)251-4842

Daytime Phone #

CR2E034 (1/98)