2008 FOR PROFIT CORPORATION

FILED

-	ANNUAL R	EPORT	••		Ma	ır 31, 2	2008 08:0)0 A
1. Entity Nam	MENT # F9400000255 VINEYARDS A CALIFORNIA CO		•		Secre	tary of Sta	ate	
Principal Plac	e of Business 'M	ailing Address					•	
3031 LOPEZ	Z DRIVE F	0360	1 14 81144 1111		76 (3) 88 (6 8 (1 88) 8)(3			
				03212008	No Chg-P	CR2E034 (1		
D	O NOT WRITE II	N THIS SPA	CE	4. FEI Numbe	<u> </u>		Applied For	
			14.00 G 14.00 G	77-021			Not Applicable	
· · · · · ·				5. Certificate	of Status Desired		75 Additional Required	
	6. Name and Address of Current Regis	stered Agent	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	"大学"的"大学"的"大学"的"大学"的"大学"的"大学"的"大学"的"大学"的		1000 mg 4.3	F-3-7 (1)	
AUGUSTAN WINE & FOOD 9801 PREMIER PKWY. MIRAMAR, FL 33025				The state of the s	NOT WI THIS SP	51.55 S. S. S. S.		
	named entity submits this statement for the pions of registered agent.	ourpose of changing its register	্রাজন আমার্কিন ভিন্ন <u>বি</u> ed office or register	ತ್ರೇಳೇಶಿಸಿಕೆ ed agent, or bot	h, in the State of Flor	ida. I am familia	ar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	Jangloshia (MOTC Pagistara	d Agent signature required	, has reinstation)		DATE		
FIL After M	E NOW!!! FEE IS \$150.00 00 00 00 00 00 00 00 00 00 00 00 00	9. Election Campaign Finar Trust Fund Contribution.	ncing \$5.	00 May Be	U0000 04/11/08)0975960	016 150.00	
10.	OFFICERS AND DIREC	CTORS	1271/2012 A91 A		with the same	\$1884.TQ.\$33	(学学)11、11、19等 20-1	
TITLE	P TALLEY, BRIAN	· · · · · · · · · · · · · · · · · · ·		Programme Andrews		(Train)		
STREET ADDRESS	1140 VARD LOOMIS LANE	一种工作的		ACTOR AND				
CITY-ST-ZIP	ARROYO GRANDE, CA 93420						***	
TITLE	ST TALLEY BOSEMARY			1.00		igitality of the	1. 18 g	,
NAME STREET ADDRESS	TALLEY, ROSEMARY 3000 BRANCH MILL RD.							
CITY-ST-ZIP	ARROYO GRANDE, CA 93420		Section of the section of		للمراث الاناق والأواث والسائل المراوي المراوي المراوي المراوي		(h-	
TITLE NAME	· · · · - ··		3. 4 5 5 m 3			الوجوم أرار المنازاران		
STREET ADDRESS						The same		
STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE		
CHY-ST-ZIP				DO IN	NOT W	RITE		
CITY-ST-ZIP				DO IN	NOT W THIS SP	RITE ACE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS				DO IN	THIS SP	RITE ACE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				DO IN	THIS SP	RITE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				DO IN	THIS SP	RITE ACE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				DO IN	THIS SP	RITE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP				DO IN	THIS SP	RITE		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.