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FILED

Feb 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000005537 (4)

1. Corporation Name

GREENFIELD WINE COMPANY



Principal Place of Business

PO BOX 452
ST. HELENA CA 94574

Mailing Address

PO BOX 452
ST. HELENA CA 94574-0452

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

11/13/1995

3a. Date of Last Report

01/26/1996

4. FEI Number

68-0224311

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

9. Name and Address of Current Registered Agent

WINE CLEARING, INC.
2210 N.W. 28TH ST.
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name

Tropical Wines, Inc.

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

3000-6 N.W. 25th Avenue

83

84 City

Pompano Beach

FL

85 Zip Code

33069

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

(JASON LADUKE, PRESIDENT)

01/26/97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PC
STREET ADDRESS CARTLIDGE, TONY
CITY-ST-ZIP 2790 SPRING ST.
ST. HELENA CA 94574

TITLE ☐ DELETE
NAME STVC
STREET ADDRESS TOPPING, HARRY
CITY-ST-ZIP 842 COUNTRY CLUB LN
SONOMA CA 95476

TITLE ☐ DELETE
NAME D
STREET ADDRESS GREENWOOD, BRIAN
CITY-ST-ZIP 1056 POMONA AVE.
ALBANY CA 94796

TITLE ☐ DELETE
NAME D
STREET ADDRESS BROWNE, GLENN
CITY-ST-ZIP 416 TROON DR.
NAPA CA 94558

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Tony Cartlidge
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TONY CARTLIDGE 01/31/97 707-963-3200
PRESIDENT
Date Daytime Phone #

CR2E034 (9/96)