

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2000 8:00 am
Secretary of State
 05-23-2000 90260 022 ***150.00

DOCUMENT # F95000005537

1. Entity Name

GREENFIELD WINE COMPANY

Principal Place of Business

Mailing Address

PO BOX 452
 ST. HELENA CA 94574

PO BOX 452
 ST. HELENA CA 94574-0452

2. Principal Place of Business

3222 EHLERS LANE

3. Mailing Address

Suite, Apt. #, etc.

City & State

ST. HELENA, CA

City & State

4. FEI Number

68-0224311

Applied For

Not Applicable

Zip

94574

Country

USA

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TROPICAL WINES, INC.
3000-6 NW 25TH AVE
POMPANO BCH FL 33069

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
STVC
TOPPING, HARRY
~~**942 COUNTRY CLUB LN**~~
~~**SONOMA CA 95476**~~

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
CFO - SEC
HARRY TOPPING
1570 SYLVANER AVE
ST. HELENA, CA 94574
☒ Change ☐ Addition

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

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

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

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LISA WELBORN, Atty-IN-Fact

Date

2/15/00

Daytime Phone #

707 963 3200

CR/E034 (3/99)