

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004946

FILED
Mar 31, 2009
Secretary of State

Entity Name: HERON HILL VINEYARDS, INC.

Current Principal Place of Business:

9301 COUNTY ROUTE 76
HAMMONDSPORT, NY 14840

New Principal Place of Business:

Current Mailing Address:

9301 COUNTY ROUTE 76
HAMMONDSPORT, NY 14840

New Mailing Address:

FEI Number: 16-1080336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEDIA, RON
TRANSATLANTIC WINES & SPIRITS
15960 NW 15TH AVENUE
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: P () Delete
Name: INGLE, JOHN W JR
Address: 5970 HICKS RD
City-St-Zip: NAPLES, NY

Title: S () Delete
Name: INGLE, JOSEPHINE F
Address: 5970 HICKS RD
City-St-Zip: NAPLES, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: INGLE, JOHN W JR
Address: 5970 HICKS RD
City-St-Zip: NAPLES, NY 14512

Title: S (X) Change () Addition
Name: INGLE, JOSEPHINE F
Address: 5970 HICKS RD
City-St-Zip: NAPLES, NY 14512

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: JOHN W. INGLE, JR.

P

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date