


### 2004 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # F97000005983</b>		<b>FILED</b>	
1. Entity Name <b>GHIRARDELLI CHOCOLATE COMPANY</b>		 <b>TALLAHASSEE, FLORIDA</b>	
Principal Place of Business <b>1111 139TH AVE SAN LEANDRO, CA 94578 US</b>		Mailing Address <b>1111 139TH AVE SAN LEANDRO, CA 94578</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>95-3451829</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$6.75 Additional Fee Required</b>		09012004 Chg-P CR2003A (10/03)	
6. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office to Tallahassee, Florida. I am familiar with, and accept the obligations of registered agent.		9. Signature of Registered Agent <b>Tha Perlm</b> Special Assistant Secretary <b>5/16/05</b>	
SIGNATURE		DATE	
FILE NOW!!! FEE IS \$650.00 Due by September 8, 2004		B. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WEISGKOPF, DIETER 1111 139TH AVE SAN LEANDRO, CA 94578	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Dieter Weiskopf 1111 139th Avenue San Leandro, CA 94578</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C TANNER, ERNST 1111 139TH AVE SAN LEANDRO, CA 94578	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>300055656323 06/02/05--01029--015 ***341.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AUERBACH, JURGEN 1111 139TH AVE SAN LEANDRO, CA 94578	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>5/17 AUERBACH JURGEN 1111 139th Avenue San Leandro, CA 94578</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KITZHANTEL, KAMILLO 1111 139TH AVE SAN LEANDRO, CA 94578	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>FILED MAY 24 PM 4:05 TALLAHASSEE, FLORIDA</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>FILED MAY 24 PM 4:05 TALLAHASSEE, FLORIDA</b>
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(f), Florida Statutes. I further certify that this 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, 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 empowerments.			
SIGNATURE: <b>[Signature]</b>		DATE: <b>5/16/05</b>	
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE	