

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F98000005332

1. Entity Name
LAMBERT BRIDGE WINERY INC.



Principal Place of Business
4085 W DRY CREEK ROAD
HEALSBURG, CA 95448

Mailing Address
4085 W DRY CREEK ROAD
HEALSBURG, CA 95448

FILED
Mar 29, 2004 08:00 AM
Secretary of State



03222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 68-0308769	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LANO, CHRIS
1082 SOUTH ROGERS CIRCLE
BOCA RATON, FL 33487

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME CHAMBERS, PATRICIA
STREET ADDRESS 4085 W. DRY CREEK ROAD
CITY-ST-ZIP HEALSBURG, CA

TITLE V
NAME FAUST, REBECCA
STREET ADDRESS 4085 W. DRY CREEK ROAD
CITY-ST-ZIP HEALSBURG, CA 95448

TITLE ST
NAME SMITH, DONALD
STREET ADDRESS 4085 W. DRY CREEK ROAD
CITY-ST-ZIP HEALSBURG, CA

TITLE V
NAME ROY, DAVID J
STREET ADDRESS 4085 W DRY CREEK RD
CITY-ST-ZIP HEALSBURG, CA

TITLE D
NAME BOROWSKY, KURT
STREET ADDRESS 4085 W DRY CREEK RD
CITY-ST-ZIP HEALSBURG, CA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000098377
03/29/04-80039-003 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

Rebecca Faust

Rebecca Faust

3/24/04 707-431-9600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #