

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000002618

1. Entity Name
USA WINE SOUTH, LLC



Principal Place of Business
1350 SHEELER ROAD
APOPKA, FL 32703

Mailing Address
1350 SHEELER ROAD
APOPKA, FL 32703



02182004 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number
59-3540589

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLATTERY, JOHN J JR.
1350 SHEELER ROAD
APOPKA, FL 32703

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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

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	FLATTERY, JOHN J JR.
STREET ADDRESS	2315 SWEETAIRE CT
CITY- ST- ZIP	APOPKA, FL 32712
TITLE	MGR
NAME	STAFFORD, PHILIP
STREET ADDRESS	1605 OXFORD ROAD
CITY- ST- ZIP	CHARLOTTESVILLE, VA 22903
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #