

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001305

FILED  
Feb 20, 2009  
Secretary of State

**Entity Name:** DOMAINE DE MARIA SOTER LLC

**Current Principal Place of Business:**

10880 MINERAL SPRINGS ROAD  
CARLTON, OR 97111

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 430  
CARLTON, OR 97111

**New Mailing Address:**

FEI Number: 93-1265782      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOOTH, LYNN  
C/O SOUTHERN WINE & SPIRITS  
1600 NW 163RD STREET  
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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SOTER, ANTHONY M  
Address: P.O. BOX 400  
City-St-Zip: YAMHILL, OR 97148

Title: MGR      ( ) Delete  
Name: SOTER, MICHELLE  
Address: P.O. BOX 400  
City-St-Zip: YAMHILL, OR 97148

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic 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: ANTHONY M. SOTER      MGR      02/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date