

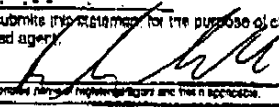
10/17/2005 16:04 8666915180
10/18/2005 09:03 925-256-4223

OPICI WINE COMPANY
MILLER

PAGE 01

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M02000001778			
1. Entity Name HENDRY RANCH WINERY, LLC			
Principal Place of Business 3104 REDWOOD RD NAPA, CA 94558		Mailing Address 3104 REDWOOD RD NAPA, CA 94558	
2. Principal Place of Business		3. Mailing Address	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 94-3270557		Applicable For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent JOHNSON BROTHERS LIQUOR COMPANY OF FLORIDA 4600 G. CHURCH TAMPA, FL 33611		7. Name and Address of New Registered Agent Name OPICI Street Address (P.O. Box Number is Not Acceptable) 1423 WATER TOWER RD City LAKE PARK FL Zip Code 33423-7904	
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 I accept the obligations of registered agent.			
SIGNATURE 		DATE 10/18/05	
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENDRY, GEORGE 3104 REDWOOD RD NAPA, CA 94558 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1-10-05 92054-038 \$50.00 REINSTATEMENT 2005 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RIDLEY, SUSAN 3104 REDWOOD RD NAPA, CA 94558 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(i), Florida Statutes. I further certify that the information on this report is true and accurate and that my signature shall have the same legal effect as if made under oath. 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: 		DATE: 1-6-05 925-256-4223	
SIGNATURE AND TYPED OR PRINTED NAME OF FILING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE	

P 6327 TAC FL 32314