02/18/2003 10:47 15095259227

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Feb 24, 2003 8:00 am
Secretary of State
01-22-2003 90095 017 ****50.00

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M02000002770

1. Entity Name
PEPPER BRIDGE WINERY, L.L.C.

Principal Place of Business
1704 J B GEORGE ROAD
WALLA WALLA WA 99362

Mailing Address
1704 J B GEORGE ROAD
WALLA WALLA WA 99362

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip / Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip / Country

4. FEI Number 91-1931700 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
CARR, TIM
9801 PREMIER PARKWAY
MIRAMAR FL 33025

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	See Attachment	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change	☐ Addition

CR2E063 (10/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED 1/16/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Attachment
58009864
M02000027770

Attachment

Name: Goff, Raymond E. Trust
Sex: Male
Title: Member
Address: P.O. Box 313
Simms, MT 59477
Phone # (406) 264-5734
Social Security# 464-72-0678
DOB: 10/27/45
Shares: 10.578%

Name: Sequel Limited Partnership
Title: General Partners
First Partner: Elaine Patrice Adams
Social Security # 006-46-9270
DOB: 09/16/63
Second Partner: Laurie Dawn McKibben
Social Security # 533-72-6795
DOB: 08/23/60
Address: 1244 Forrest Lane
Walla Walla, WA 99362
Phone # (509) 525-7505
Shares: 15.088%

Name: Michael Hogue
Sex: Male
Title: Member
Address: P.O. Box 31
Prosser, WA 99350
Phone: (509) 786-4557
Social Security# 539-42-7898
DOB: 07/09/44
Shares: 11.283%

Name: The Hogue Vineyards, LLC
Limited Partnership
Title: Michael Hogue, Member
Sex: Male
Social Security# 539-42-7898
DOB: 07/09/44
Address: P.O. Box 31
Prosser, WA 99350
Phone: (509) 786-4557
Shares: 10.053%

Name: Diana D. Goff, Trust
Sex: Female
Title: Member
Address: P.O. Box 313
Simms, MT 59477
Phone: (509) 529-5544
Social Security# 576-52-4247
DOB: 06/12/47
Shares: 10.578%

Name: Jean-Francois Pellet
Sex: Male
Title: Member
Address: 1334 Crystal Court
Walla Walla, WA 99362
Phone # (509) 527-3382
Social Security # 613-09-1218
DOB: 10/31/66
Shares: 5.000%