

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000000371

FILED
Feb 28, 2006
Secretary of State

Entity Name: COLLIER FALLS VINEYARDS, LLC

Current Principal Place of Business:

9711 W. DRY CREEK ROAD
HEALDSBURG, CA 95448

New Principal Place of Business:

Current Mailing Address:

9931 W. DAT CREEK RD.
HEALDSBURG, CA 95448

New Mailing Address:

9931 W. DRY CREEK RD.
HEALDSBURG, CA 95448

FEI Number: 68-0406957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLIER, RON
C/O ABEL, BAND, RUSSELL, COLLIER, PITCHFOR
240 SOUTH PINEAPPLE AVENUE
SARASOTA, FL 34236 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: MEM () Delete
Name: COLLIER, BARRY LEE
Address: 9931 W. DRY CREEK RD
City-St-Zip: HEALDSBURG, CA 95448

Title: MEM () Delete
Name: COLLIER, MARY SUSAN
Address: 9931 W. DRY CREEK RD
City-St-Zip: HEALDSBURG, CA 95448

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 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: BARRY LEE COLLIER

MEM

02/28/2006

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