2002 UNIFORM BUSINESS REPORT (UBR)

Jan 27, 2002 8:00 am DOCUMENT # M9900001202 Secretary of State 1. Entity Name 01-27-2002 90037 021 ****50.00 CA KIRKLAND RANCH LLC Principal Place of Business Mailing Address ONE KIRKLAND RANCH ROAD ONE KIRKLAND RANCH ROAD 910614 NAPA CA 94558 NAPA CA 94558 3. Mailing Address 2. Principal Place of Business P.O. Box 5387 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 94-2694339 94581 Napa, CA Not Applicable Country \$5.00 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) re, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 ADDITIONS/CHANGES 10. MANAGING MEMBERS/MANAGERS CR2E083 (9/01) ☐ Addition Change MGRM TITLE TITLE ☐ Delete KIRKLAND, LARRY NAME NAME TWO KIRKLAND RANCH RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPA CA 94558 ☐ Addition MGRM ☐ Delete TITLE Change KIRKLAND, BILLIE NAME NAME TWO KIRKLAND RANCH RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPA CA 94558 - Change - 🖸 Addition **MGRM** TITLE ☐ Delete TITLE NAME KIRKLAND, LONNIE NAME STREET ADDRESS 936 AUGUSTA CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAPA CA ☐ Addition Change MGRM ☐ Delete TITLE TITLE NAME DAVISON, CHRISTINE NAME STREET ADDRESS STREET ADDRESS TWELVE KIRKLAND RANCH RD. CITY-ST-ZIP CITY-ST-ZIP NAPA CA 94558 · Change ☐ Addition MGRM Delete TITLE KIRKLAND, DEBORAH NAME NAME STREET ADDRESS STREET ADDRESS 705 COLLIER DRIVE CITY-ST-ZIP CITY-ST-ZIP **DIXON CA 95620** Delete Change ☐ Addition MGRM TITLE NAME **GROSSI, JENNIFER** NAME STREET ADDRESS 809 WEST 117TH ST., SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JENKS OK 74037

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

#Deborah Kirkland, Member 01/09/02 (707)254-9100 Daytime Phone #

FILED

Date