

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44412

FILED
Mar 24, 2009
Secretary of State

Entity Name: FLORIDA WINEFEST AND AUCTION, INC.

Current Principal Place of Business:

1991 MAIN ST
117
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4193
SARASOTA, FL 342304193 US

New Mailing Address:

FEI Number: 65-0455486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAND, DAVID
240 S PINEAPPLE AVE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

BAND, DAVID
ONE SOUTH SCHOOL AVENUE
500
SARASOTA, FL 34237 US

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:

03/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOEVNER, SANDRA
Address: 1991 MAIN ST, STE 117
City-St-Zip: SARASOTA, FL 34236

Title: DT () Delete
Name: BARBERIO, ALLAN
Address: 1858 RINGLING BLVD
City-St-Zip: SARASOTA, FL 34236

Title: VD () Delete
Name: MCGILLICUDDY, DENNIS
Address: 5111 OCEAN BLVD., #C
City-St-Zip: SARASOTA, FL

Title: DS () Delete
Name: BAND, MYRNA
Address: 4100 FLAMINGO AVE
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change () Addition
Name: BARBERIO, ALLAN
Address: 1990 MAIN STREET, SUITE 800
City-St-Zip: SARASOTA, FL 34236

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLAN BARBERIO

DT

03/24/2009

Electronic Signature of Signing Officer or Director

Date