

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004700

FILED
Jan 13, 2005
Secretary of State

Entity Name: HOME WINE AND BEER TRADE ASSOCIATION, INC.

Current Principal Place of Business:

649 TIMBERPOND DRIVE
BRANDON, FL 33510 US

New Principal Place of Business:

Current Mailing Address:

649 TIMBERPOND DRIVE
BRANDON, FL 33510 US

New Mailing Address:

FEI Number: 59-3307380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERSON, DOLORES
649 TIMBER POND DRIVE
BRANDON, FL 33510 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALSTON, MARK
Address: 1200 S. STATE
City-St-Zip: SALT LAKE CITY, UT 84111

Title: D () Delete
Name: ROBERSON, DOLORES
Address: 649 TIMBER POND DRIVE
City-St-Zip: BRANDON, FL 33510

Title: D () Delete
Name: AULT, RAY
Address: 2990 EAST STREET
City-St-Zip: ANDERSON, CA 96007

Title: D () Delete
Name: BABCOCK, ALLISON
Address: 122 E. MAIN STREET
City-St-Zip: BELLEVILLE, IL 62220

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 Section 119.07(3)(i), 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: DOLORES M. ROBERSON

MRS.

01/13/2005

Electronic Signature of Signing Officer or Director

Date