## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000096398

FILED Aug 08, 2005 Secretary of State

Entity Nam	ne: MOUNT	OORA WINERY, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
144 W. 5TH MOUNT DO	I AVENUE DRA, FL 327!	57			
Current Mailing Address:			New Mailing Address	:	
P.O. BOX 1 MT DORA,					
FEI Number:	20-1289078	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
OSSO, WAYNE J 152 LAKEVIEW RESERVE BLVD WINTER GARDEN, FL 34778 US				OSSO, WAYNE J 152 LAKEVIEW RESERVE BLVD WINTER GARDEN, FL 34787 US	
The above in the State		submits this statement for the pu	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: WAYNE J. OSSO				08/08/2005	
Electronic Signature of Registered Agent			nt	Date	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	OSSO, WAYNE	Delete EJ / RESERVE BLVD DEN, FL 34787 US	Title: ( Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	OSSO, VIRGIN 152 LAKEVIEV	Delete IA M / RESERVE BLVD JEN, FL 34787 US	Title: ( Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name:	TREA ( OSSO, BRIAN	) Delete J	Title: ( Name:	( ) Change ( ) Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: WAYNE J. OSSO PRES 08/08/2005

152 LAKEVIEW RESERVE BLVD

WINTER GARDEN, FL 34787 US

Address: City-St-Zip: