튀LE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P13549

1. Corporation Name

TILE

NAME

STREET ADDRESS

THOMPSON, BRIAN

38558 ROAD 128- 56418 S, LACJACAUR

GOLDEN STATE VINTNERS INCORPORATED

Principal Place of Business	Mailing Address
8418 S LAC JAC AVE Parlier ca 93648 US	401 ST HELENA HWY S ST HELENA CA 94574 US
2. Principal Place of Business	2a Mailing Address

FILED

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90225 039 ***150 00

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/10/1987 4. FEI Number Applied For 94-0358460 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired П Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Added to Fees 28 Trust Fund Contribution 23 Country Zip Country Zip 8. This corporation owes the current year Intangible Yes □ No 30 Personal Property Tax. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 82 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** 83 84 Citv 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered runsuant to the provisions of Sections 607,0002 and 607,1006, Frontal Statutes, the appointment comporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida, Succh change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DIRECTUR CEO □ DELETE 1.1 TITLE Change TITLE FOREST, Gred J. 800 Newport Center Dr. STE840 Newport Beach, CA 72660 O'NEILL, JEFFREY B. 12 NAME NAME 38558 ROAD 128 500 Drakes Landing Rd 1.3 STREET ADDRESS STREET ADDRES **CUTLER CA** 94904 1.4 CITY-ST-ZIP CITY-ST-ZIF TITLE 2.1 TITLE Hedrick W. Scott 3000 Sand Hill Rd, Bldy 3-255 BINKLEY, NICHOLAS 2.2 NAME NAME 800 NEWPORT CTR DR STE 725-8-40 STREET ADDRESS 2.3 STREET ADDRESS Menlo Park, CA 74025 NEWPORT BCH CA 92660 CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ Change Addition □ DELETE 3.1 TITLE DIRECTOR TITLE WOLTER, DOUGLAS R 3.2 NAME MUllin, POTER NAME 800 NEWPORT CTR DR STE-725-840 3.3 STREET ADDRESS STREET ADDRESS NEWPORT BCH CA CITY-ST-ZIP 3.4. CITY-ST-ZIP □ DELETE DIRECTOR ☐ Change Addition 4.1 TITLE TITLE McDonald, John G STANFORD UNIVERSITY BROWN, JEFFREY J BROWN, JEFFREY J 2715 WINDSOR DR &COLDWPOIT CTR. DR #840 43 STREET ADDRESS STREET ADDRESS CORONA DEL MARGA NEWPOIT BCh, CA 920 DACHY-ST-ZIP CITY-ST-ZIPDELETE.... _ [Addition 5.1.TITLE . Change_ TITLE-FOX. KEITH R 52 NAME NAME 40-LINDEN-CIRCLE 10 East 53rd ST 5.3 STREET ADDRESS STREET ADDRESS SCARBOROUGH NY 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition

Parlier CA 93698 CITY-ST-ZIP 14. 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

1-22-99 SIGNATURE:

CR2E034 (11/98