2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# P14330

Entity Name: DELICATO VINEYARDS INCORPORATED

Current Principal Place of Business:

12001 S. HIGHWAY 99
MANTECA, CA 95336

New Principal Place of Business:

Current Mailing Address:

12001 S. HIGHWAY 99
MANTECA, CA 95336

New Mailing Address:

FEI Number: 94-2212174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

QUINTER, ROBERT
9960 ROYAL CARDIGAN WAY
WELLINGTON, FL 33411 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: SD ( ) Delete
Name: INDELICATO, FRANK
Address: 11845 S. HIGHWAY 99
City-St-Zip: MANTECA, CA

Title: TD ( ) Delete
Name: INDELICATO, DOROTHY
Address: 4140 E. FRENCH CAMP RD.
City-St-Zip: MANTECA, CA

Title: D ( ) Delete
Name: INDELICATO, JASPER
Address: 20700 AUSTIN ROAD
City-St-Zip: MANTECA, CA 95336

Title: CD ( ) Delete
Name: INDELICATO, CHRISTOPHER
Address: 1193 BLUE TEAL PLACE
City-St-Zip: MANTECA, CA 95337

Title: COB ( ) Delete
Name: INDELICATO, VINCENT
Address: 4140 E FRENCH CAMP ROAD
City-St-Zip: MANTECA, CA 95336

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:

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

SIGNATURE: DOROTHY INDELICATO TD 02/05/2009

Electronic Signature of Signing Officer or Director — Date