

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P15998

FILED
Feb 12, 2003
Secretary of State

Entity Name: GOOSE CROSS CELLARS, INC.

Current Principal Place of Business:

1119 STATE LN
YOUNTVILLE, CA 94599

New Principal Place of Business:

Current Mailing Address:

1119 STATE LN
YOUNTVILLE, CA 94599

New Mailing Address:

FEI Number: 68-0084649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOX, JAMES
12247 CAPTAINS LANDING
1
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

TANGREDI, ALEX
1425 WATERTOWER ROAD
LAKE PARK, FL 33403 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: ALEX TANGREDI

02/12/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GORSUCH, GEOFFREY H,
Address: 1119 STATE LN
City-St-Zip: YOUNTVILLE, CA

Title: P () Delete
Name: TOPPER, DAVID
Address: 1119 STATE LN
City-St-Zip: YOUNTVILLE, CA

Title: S () Delete
Name: TOPPER, PAMELA
Address: 1119 STATE LINE
City-St-Zip: YONTVILLE, CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GORSUCH, GEOFFREY H VP
Address: 1119 STATE LN
City-St-Zip: YOUNTVILLE, CA 94599

Title: P (X) Change () Addition
Name: TOPPER, DAVID P
Address: 1119 STATE LN
City-St-Zip: YOUNTVILLE, CA 94599

Title: S (X) Change () Addition
Name: TOPPER, PAMELA S
Address: 1119 STATE LINE
City-St-Zip: YOUNTVILLE, CA 94599

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.

SIGNATURE: PAMELA TOPPER

S

02/12/2003

Electronic Signature of Signing Officer or Director

Date