

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17129

FILED
Feb 28, 2008
Secretary of State

Entity Name: CANNON WINES LIMITED CO.

Current Principal Place of Business:

350 SANSOME ST. #800
SAN FRANCISCO, CA 94104

New Principal Place of Business:

Current Mailing Address:

350 SANSOME ST. #800
SAN FRANCISCO, CA 94104

New Mailing Address:

FEI Number: 94-2547459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAPHAM, KEN
2418 MARATHON LANE
FT. LAUDERDALE, FL 333124610 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: PD () Delete
Name: FORTIN, LAURENT
Address: 350 SANSOME STREET, #800
City-St-Zip: SAN FRANCISCO, CA 94104

Title: SD () Delete
Name: WONG, AGNES
Address: 320 PENINSULA AVE
City-St-Zip: SAN MATEO, CA 94401

Title: TD () Delete
Name: MACIA, MARC
Address: 350 SANSOME STREET, #800
City-St-Zip: SAN FRANCISCO, CA 94104

Title: D () Delete
Name: HARMEL, LIONEL
Address: 350 SANSOME ST #800
City-St-Zip: SAN FRANCISCO, CA 94104

Title: C () Delete
Name: LECCIA, ANTOINE
Address: 350 SANSOME ST. #800
City-St-Zip: SAN FRANCISCO, CA 94104

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: VINCENT, GOYAT
Address: 350 SANSOME STREET, #800
City-St-Zip: SAN FRANCISCO, CA 94104

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

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

Title: D () Change (X) Addition
Name: NOUET, OLIVIER
Address: 350 SANSOME ST., #800
City-St-Zip: SAN FRANCISCO, CA 94104

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: ANDREW B WILE (ATTY-IN-FACT)

A

02/28/2008

Electronic Signature of Signing Officer or Director

_____ Date