


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 10, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # P17657 1. Entity Name CAYMUS VINEYARDS, INCORPORATED |  |
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|--|---|
| Principal Place of Business 8700 CONN CREEK ROAD RUTHERFORD, CA 94573 US | Mailing Address PO BOX 268 RUTHERFORD, CA 94573 |
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DO NOT WRITE IN THIS SPACE



01252005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 94-2151816 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

SOUTHERN WINE & SPIRITS
1600 NW 163RD ST
MIAMI, FL 32169

**DO NOT WRITE
IN THIS SPACE**

8. The above named agent submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, the agent named above.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)
Typed or printed name of registered agent and title if applicable. DATE _____

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|---|---|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P WAGNER, CHARLES J. 8744 CONN CREEK RD. RUTHERFORD, CA |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VST PERRY, KAREN 3469 WESTMINSTER WAY NAPA, CA |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles J. Wagner - OWNER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/05 707 963-4204
Date Daytime Phone #