

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P21980

1. Entity Name

PWG VINTNERS USA, INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90030 034 ***150.00

Principal Place of Business

Mailing Address

60 GARDEN CT
STE 220
MONTEREY CA 93940
US

60 GARDEN COURT
SUITE 220
MONTEREY CA 93940-5341
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

94-3118495

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
HACKNEY, EDWARD T
4620 CHATTACHOOCHIEE CROSSING
MARIETTA GA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
Smith Brently
6020 Kim Ann Lane
Prunedale, CA 93907 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MORELL, KATHLEEN
60 GARDEN CT, STE 220
MONTEREY CA ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
H. David M. Combe
8 Martin Street
Harbord, NSW, Australia ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
FERNANDEZ, JOSE F
60 GARDEN CT, STE 220
MONTEREY CA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HURCOMBE, PETER
1698 MANHASSET DRIVE
DUNWOODY GA 30338 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
PHILLIPS, SCOTT R
1402 SHADOWOOD PARKWAY
ATLANTA GA 30339 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

831-655-0904