

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22230

Entity Name: RIDGE VINEYARDS, INC.

FILED
May 22, 2009
Secretary of State

Current Principal Place of Business:

17100 MONTE BELLO RD.
CUPERTINO, CA 95014 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1810
CUPERTINO, CA 95015

New Mailing Address:

FEI Number: 94-1654621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEDIA, RON
15960 NW 15TH AVE
MIAMI, FL 33169 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BUTTITTA, NICOLE
Address: 123 OTIS AVE.
City-St-Zip: WOODSIDE, CA 94062

Title: VP () Delete
Name: AMADIA, DAVID
Address: 515 HENRY COWELL DRIVE
City-St-Zip: SANTA CRUZ, CA 95060

Title: P () Delete
Name: REISEN, DONN P.
Address: 2659 ALPINE ROAD
City-St-Zip: MENLO PARK, CA 94025

Title: DC () Delete
Name: DRAPER, PAUL
Address: 17100 MONTE BELLO RD.
City-St-Zip: CUPERTINO, CA 95014

Title: COO () Delete
Name: VERNON, MARK
Address: 12119 FOOTHILL LANE
City-St-Zip: LOS ALTOS HILLS, CA 94022

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: DAVID AMADIA

VP

05/22/2009

Electronic Signature of Signing Officer or Director

Date