

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

04-23-2002 90427 001 \*\*\*150.00

**DOCUMENT #** P22502

**1. Entity Name** Chalone Incorporated

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**  
621 Airport Rd.

**3. Mailing Address**  
621 Airport Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**  
Napa, CA

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Napa, CA

**4. FEI Number**  
94-1696731

**Applied For**  
☐ Not Applicable

**Zip**  
94558

**Country**  
USA

**Zip**  
94558

**Country**  
USA

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

**Name**  
Dennis Sanborn

**Street Address (P.O. Box Number is Not Acceptable)**  
391 N. Pennsylvania Ave.

**City** Winter Park **FL** **Zip Code** 32789

**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 resigning)

**DATE**

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

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	Please see attached.		
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
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TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

**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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:**  Robert B. Farver

3/27/02 (707) 254-4289

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

ATTACH # P22502/637125

**CHALONE WINE GROUP LTD. dba THE CHALONE WINE GROUP  
OFFICERS, DIRECTORS & STOCKHOLDERS**

**621 Airpark Rd.**

**Napa, CA 94558**

**Telephone: (707) 254-4200 Facimile: (707) 254-4201**

**EFFECTIVE: September 1, 2001**

**OFFICERS:**

**CEO & PRESIDENT**

Thomas B. Selfridge  
21 Westgate Drive  
San Rafael, CA 94903

**VICE PRESIDENT/SALES & DISTRIBUTION**

Robert B. Farver  
3344 Linda Mesa Way  
Napa, CA 94558

**VICE PRESIDENT/MARKETING**

Paul B. Novak  
3448 Young Avenue  
Napa, CA 94558

**SECRETARY**

Daniel E. Cohn  
12 Indian Rock Court  
Tiburon, CA 94920

**CHIEF FINANCIAL OFFICER**

Shawn Conroy Blom  
1064 Stonebridge Drive  
Napa, CA 94558