## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P22533

(4)

PALMER VINEYARD, INC.

Principal Place of Business Mailing Address

108 SOUND AVENUE RIVERHEAD NY 11901

108 SOUND AVENUE RIVERHEAD NY 11901-1104

## FILED Apr 29 1997 8:00am Secretary of State



RIVERHEAD NY 11801		RIVERHEAD NY 11901-1104						
					3. Date Incorporated or Qualified 01/12/1989		to of Last R )1/1996	eporl
2. Principal Pl	ace of Business	28. Mailing Address			4. FEI Number			oplied For
21		[26]		13-3297420			ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	
Zip	Country	Ζφ	Count	у	8. This corporation has liability for in	ntangible	····	
24	25	29	30				] No	
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Re	gistered /	\gent	
PRE	MIER BEVERAGE COMPANY		8	1 Name				
	ER HACKER, VP		8	2 Street Add	Iress (P.O. Box Number is Not Acceptab	le)		
3700	COMMERCE PARKWAY		Ľ					
	AMAR FL 33025		8	3		-		
			8	4 City			<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 607.0507	2 and 607.1508, Florida Statu	tes, the abo	L ve-named corp	poration submits this statement for the pilion's board of directors. I hereby accep	urpose of	 changing it	s registered
office or re agent. I a	egistered agent, or both, in the State i m familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, Fl	authorized l lorida Statul	by the corpora es.	dion's board of directors. I hereby accep	it the app	ointment as	registered
SIGNATURE	Signalure, typod or printed name of registered ager		H. Registered A	gant signature requ	red when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	PSD	☐ DELETE	1.1 TITLE				Change	Addition
NAME	PALMER, ROBERT J.		1.2 NAM					
STREET ADDRESS	178 LAKE RD.		1.3 \$1RE	ET ADDRESS				
CITY-ST-ZIP	HUNTINGTON NY		1.4 CITY				<u> </u>	
TITLE		☐ DELETE	2.1 TrillE	\ \			☐ Change	Addition
NAME			2.2 NAMI		11			
STREET ADDRESS				E1 ADDRESS				
CITY-ST-ZIP TITLE		Dotlete	2.4 (11)				Change	Addition
		C bleet	3.1 TITLE 3.2 NAM:	i i			L) Vitality	LJ NOSILION
NAME OXOCCI ADDDICOS				1				
STREET ADDRESS				E1 ADDRESS				
CITY-ST-ZIP		DELETE	3.4 CITY 4.1 TITLE				Change	Addition
NAME			4.2 NAM	i				
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			4 4 CITY					
TITLE		DELETE	51 1171.6				Change	Addition
NAME			5.2 NAM					
STREET ADDRESS				EL ADDRESS				
CITY-ST-ZIP			5.4 CITY					l
TITLE		DELETE	6.1 1111.6				Change	Addition
NAME		•	6.2 NAM				-	
STREET ADORESS				E1 ADDRESS				
CITY-ST-ZIP			6.4 CITY	I				
V 11 V 1 4 11	<del></del>		0.4 0111					

4. 1 do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that tam 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 12 or Block 13 if changed, or on an attachment with an additional properties.

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3/1/97 5/1,72294/