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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # P24928 ROS CREEK WINERY, INC.	\ / .			4 1910 II 1810 1810 1810 1810 1810 1810 1810	ĒIČIA JAŠUI ĀICIJ ČI		MIN IEN
B : 18	10							
Principal Place of Business Mailing Address						2120) 41411 61	U11 27011 0	JIEIT IEGI
1285 DEALY LANE NAPA CA 94559		1285 DEALY LANE NAPA CA 94559-9706						
					3. Date Incorporated or Qualified 06/26/1989	3a. Date of 02/26/1		port
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For	
21					94-2468829		Not	t Applicable
		Suite, Apt. #, etc.	i .		5. Certificate of Status Desired			Additional
22		27	4		_		Fee Re	·
City & State		City & State		6. Election Campaign Financing			May Be	
Zip	Country	28	Country		Trust Fund Contribution		Added to	
24 Zip	25	····	30		8. This corporation has liability for intangible tax under s. 199.0 Florida Statutes ☐ Yes ☐ No		199.032,	
24	9. Name and Address of Curre	29 nt Registered Agent	<u> </u>		10. Name and Address of New Rec			
CAL	LAHAN, JACK		81	Name			-	
13704 CHESTERSALL DR.								
TAMPA FL 33624			82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
יווריני	II A I E GOOE4		83					
							T ====	
			84	City		FL 85	Zip C	Code
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblid	02 and 607.1508, Florida Statu e of Florida, Such change was	les, the above-i authorized by t	named corp he corporati	oration submits this statement for the pion's board of directors. I hereby accep		nging its nent as i	registered registered
	m lamiliai with, and accept the oblig	gations or, Section bort.0003, Fi	onda Sialutes.					
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NO	E: Registered Agent	signature requin	od when reinstaling)	DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	ECTORS	S IN 12
TITLE	Р	DELETE				□ 0	Change	Addition
NAME	MAHONEY, FRANCIS V.		1.2 NAME					
STREET ADDRESS	1285 DEALY LANE		1.3 STREET ADDRESS					
CITY-ST-ZIP	NAPA CA			ZIP		· · · · · · · · · · · · · · · · · · ·		
TITLE	V	_ betain					Change	☐ Addition
NAME	MORAVEC, MELISSA		2.2 NAME					
STREET ADDRESS	1285 DEALY LANE NAPA CA		2.3 STREET ADDRESS					
CITY-ST-ZIP	S DELETE		2. 4 CITY - ST - ZIP 3.1 TITLE				Change	Addition
TITLE NAME	FORMICHELLI, ARTHUR					L (manye	MORRIUM
NAME STREET ADDRESS	1285 DEALY LANE			ODRESS				
CITY - ST - ZIP	NAPA CA							
TITLE	V	DELETE	3.4. CITY-ST- 4.1 TITLE	LIF		По	Change	Addition
NAME	MAHONEY, KATHLEEN		4. 2 NAME			_	•	_
STREET ADDRESS	1134 DEALY LANE		4.3 STREET AL	ODRESS				
CITY - ST - ZIP	NAPA CA		4.4 CITY-ST-					
TITLE		DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET AL	DORESS				
CITY - ST - ZIP			5.4 CITY - ST -	4 CITY-ST-ZIP				
TITLE			6.1 TITLE				hange	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET AL	ODRESS				
CITY-ST-ZiP			6.4 CITY-ST-	71P				

14. I 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 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 12 or Block 13 if changed, or on an attachment with an address.