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Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000047865 (8)**

1. Corporation Name
MICHAEL'S FINE WINE & SPIRIT MERCHANTS, INC.

Principal Place of Business	Mailing Address
1921 S OSPREY AVE SARASOTA FL 34236 US	1390 MAIN ST SARASOTA FL 34236-5687

3. Date Incorporated or Qualified: 06/22/1994
3a. Date of Last Report: 04/23/1996

2. Principal Place of Business: 21 — Suite, Apt #, etc.: 22 — City & State: 23 — Zip: 24 — Country: 25
2a. Mailing Address: 26 — Suite, Apt #, etc.: 27 — City & State: 28 — Zip: 29 — Country: 30

4. FEI Number: 65-0501953 — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

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

BROWN, DARYL J
1819 MAIN ST
SUITE 1100
SARASOTA FL 34236

10. **Name and Address of New Registered Agent**

81 Name: McCurdy, Jeffrey
82 Street Address (P.O. Box Number is Not Acceptable): 1390 Main Street
83
84 City: Sarasota FL — 85 Zip Code: 34236

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] — 3/19/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		
TITLE	DP	☐ DELETE
NAME	GRIFFIN, WILLIAM D	
STREET ADDRESS	1390 MAIN ST	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VST	☐ DELETE
NAME	HALLOY, RICHARD	
STREET ADDRESS	1390 MAIN ST	
CITY-ST-ZIP	SRASOTA FL	
TITLE	V	☐ DELETE
NAME	KLAUBER, MICHAEL P	
STREET ADDRESS	1921 S OSPREY AVE	
CITY-ST-ZIP	SARASOTA FL	
TITLE	V	☐ DELETE
NAME	MATSON, FRED	
STREET ADDRESS	1921 S OSPREY AVE	
CITY-ST-ZIP	SARASOTA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	VP	☐ Change ☒ Addition
1.2 NAME	McCurdy, Jeffrey	
1.3 STREET ADDRESS	1390 Main Street	
1.4 CITY-ST-ZIP	Sarasota, FL	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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.

SIGNATURE: [signature] — 3/19/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)