

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000043401

FILED
Feb 17, 2005
Secretary of State

Entity Name: PANORAMA BREWING COMPANY

Current Principal Place of Business:

793 EXCHANGE ST.
MIDDLEBURY, VT 05753 S

New Principal Place of Business:

Current Mailing Address:

C/O OTTER CREEK BREWING INC
793 EXCHANGE STREET
MIDDLEBURY, VT 057531106

New Mailing Address:

FEI Number: 59-3447237 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
660 EAST JEFFERSON STRET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: GLORFIELD, JOSEPH K
Address: 11191 SILVER WILLOW LANE
City-St-Zip: NEVADA CITY, CA 95959

Title: PS () Delete
Name: WOLAVER, MORGAN
Address: 74 PAINTER HILL RD.
City-St-Zip: MIDDLEBURY, VT 05753

Title: D () Delete
Name: WOLAVER, ROBERT
Address: 4417-B KAHILI MAKI STREET
City-St-Zip: KILAUEA, HI 96754

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PS (X) Change () Addition
Name: WOLAVER, MORGAN
Address: 793 EXCHANGE STREET
City-St-Zip: MIDDLEBURY, VT 05753

Title: D (X) Change () Addition
Name: WOLAVER, ROBERT
Address: 10231 RIDGE VIEW DR.
City-St-Zip: GRASS VALLEY, CA 95945

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MORGAN WOLAVER

PS

02/17/2005

Electronic Signature of Signing Officer or Director

_____ Date