


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 24, 2006 8:00 am**  
**Secretary of State**

05-24-2006 90008 003 \*\*\*150.00

**DOCUMENT # F05000000104**

1. Entity Name  
**FLEETWOOD VACATION CLUB, INC.**



Principal Place of Business  
**2150 WEST 18TH STREET, #300  
 HOUSTON, TX 77008**

Mailing Address  
**P.O. BOX 7638  
 RIVERSIDE, CA 92513**

**20046398**



2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

05052006 Chg-P CR2E034 (11/05)

4. FEI Number  
**20-1819604**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees** In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>PUNTORIERO, MICHAEL</b> <b>3125 MYERS STREET</b> <b>RIVERSIDE, CA 92503</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VASD</b> <b>PLOWMAN, BOYD R</b> <b>3125 MYERS STREET</b> <b>RIVERSIDE, CA 92503</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>BRAUN, CHRISTOPHER J</b> <b>3125 MYERS STREET</b> <b>RIVERSIDE, CA 92503</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSD</b> <b>THEOBALD, FORREST D</b> <b>3125 MYERS STREET</b> <b>RIVERSIDE, CA 92503</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTAS</b> <b>LARKIN, LYLE N</b> <b>3125 MYERS STREET</b> <b>RIVERSIDE, CA 92503</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>MCGILL, LEONARD J</b> <b>3125 MYERS STREET</b> <b>RIVERSIDE, CA 92503</b> <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP/SECRETARY</b> <b>LEONARD J. MCGILL</b> <b>3125 MYERS STREET</b> <b>RIVERSIDE CA 92513-7638</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: LYLE N. LARKIN** *Lyle N. Larkin* **5/14/06** **951-351-3797**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 200716398

# F05000000104

OFFICERS AND DIRECTORS  
OF  
FLEETWOOD VACATION CLUB, INC.

Boyd R. Plowman

Executive Vice President – Chief Financial Officer  
And Assistant Secretary

Christopher J. Braun

Executive Vice President

Leonard J. McGill

Sr. Vice President – General Counsel & Secretary

Lyle N. Larkin

Vice President – Treasurer & Assistant Secretary

DIRECTORS:

Boyd R. Plowman

Leonard J. McGill