

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 07, 2009
Secretary of State**

DOCUMENT# M05000000321

Entity Name: HEARTLAND RECREATIONAL VEHICLES, LLC

Current Principal Place of Business:

1001 ALL-PRO DR
ELKHART, IN 46514

New Principal Place of Business:

Current Mailing Address:

1001 ALL-PRO DR
ELKHART, IN 46514

New Mailing Address:

FEI Number: 81-0635203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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

MANAGING MEMBERS/MANAGERS:

Title: VP () Delete
Name: HOFFMAN, TIM
Address: 1001 ALL-PRO DR
City-St-Zip: ELKHART, IN 46514

Title: VP () Delete
Name: RHYMER, JOHN
Address: 1001 ALL-PRO DR
City-St-Zip: ELKHART, IN 46514

Title: CEO () Delete
Name: BRADY, BRIAN
Address: 1001 ALL-PRO DR
City-St-Zip: ELKHART, IN 46514

Title: VP () Delete
Name: CULBERTSON, JACK
Address: 1001 ALL-PRO DR
City-St-Zip: ELKHART, IN 46514

ADDITIONS/CHANGES:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DENNIS E. DONAT

CFO

01/07/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date