2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 18, 2000 8:00 am Secretary of State **DOCUMENT # P03321** 1. Entity Name CAMPING WORLD, INC.

04-18-2000 90159 035 ***150.00

P.O. BOX 90018		Mailing Address								
		THREE SPRINGS RD. P.O. BOX 90018 BOWLING GREEN KY 4210	* *		1 1 45 1(4 4c) (1			<i>J ~ 1</i> U		
2. Principal Place of Business		3. Mailing Address	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
City & State		City & State	City & State		4. FEI Number 61-0994306 Applied Fo					
						01099400			Not Applicable	
Zip	Country	Zip	Country	5. 0	Certificate of	Status Desired				
	6. Name and Address of Curren	t Registered Agent		7. N	Name and A	ddress of New	Registered	d Agent		
	2- 1	THE PARTY OF THE P	- Name	-				* = · .	-	
1200	ORPORATION SYSTEM S. PINE ISLAND ROAD		Street Addres	ss (P.O. Bo	lox Number i	s Not Acceptab	e)		Applied For Not Applicable 8.75 Additional ee Required Part	
PLAN	ITATION FL 33324									
			City				F	L Zip Co	et	
8. The above	named entity submits this statement f	or the purpose of changing it	s registered office or regis	stered age	ent, or both,	in the State of F	lorida.			
	·	,								
SIGNATURE .			·							
	Signature, typed or printed name of registered agen	t and title if applicable. (NO	TE: Registered Agent signature requ	uired when rei	einstating)		DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 2	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of St		1	ion Campaign F Fund Contributi	_			
11.	OFFICERS AND	DIRECTORS	12.	AD	DITIONS/C	HANGES TO OF	FICERS AN	ND DIRECTOR	RS IN 11	
TITLE	V	☐ Delete	TITLE				-	☐ Change	☐ Addition	
NAME	COKER, MURRAY		NAME							
STREET ADDRESS	THREE SPRINGS RD.		STREET ADDRESS							
CITY-ST-ZIP	BOWLING GREEN KY		CITY-ST-ZIP							
TITLE	DP Donnelly, Thomas A.	☐ Delete	TITLE					∟ Change	Addition	
NAME STREET ADDRESS	THREE SPRINGS RD.		NAME STREET ADDRESS							
CITY-ST-ZIP	BOWLING GREEN KY		CITY-ST-ZIP							
	V	Delete	TITLE					☐ Change	Addition	
TITLE NAME	EWING, DEAN S	∟ Delete	NAME ~					Change	Addition	
	THREE SPRINGS, RD.		STREET ADDRESS							
CITY-ST-ZIP	BOWLING GREEN KY		CITY-ST-ZIP							
TITLE	DC	□ Delete	TITLE					☐ Change	Addition	
NAME	ADAMS, STEVE	<u></u>	NAME						_	
STREET ADDRESS	650 THREE SPRINGS RD		STREET ADDRESS							
CITY-ST-ZIP	BOWLING GREEN KY		CITY-ST-ZIP							
TITLE		☐ Delete	TITLE					☐ Change	Addition	
NAME		-	NAME							
STREET ADDRESS	1		STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP							
TITLE		☐ Delete	TITLE					☐ Change	Addition	
NAME			NAME							
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP		_	CITY-ST-ZIP							
13. I hereby of indicated of the cor	certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee emi	th this filing does not qualify for the and accurate and the	or the exemption stated in my signature shall have to	Section 1	119.07(3)(i), legal effect a	Florida Statutes as if made under	I further c	ertify that the	information r or director	

changed, or on an attachment with an address, with all other like empowered.

270)781-2718