2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# P03321

Entity Name: CAMPING WORLD, INC.

Current Principal Place of Business:

THREE SPRINGS RD.
P.O. BOX 90018
BOWLING GREEN, KY 421029018

New Principal Place of Business:

THREE SPRINGS RD.
650 THREE SPRINGS ROAD
BOWLING GREEN, KY 421029018

Current Mailing Address:

THREE SPRINGS RD.
P.O. BOX 90018
BOWLING GREEN, KY 421029018

New Mailing Address:

THREE SPRINGS RD.
650 THREE SPRINGS ROAD
BOWLING GREEN, KY 421029018

FEI Number: 61-0994306 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: MOODY, BRENT
Address: 650 THREE SPRINGS RD
City-St-Zip: BOWLING GREEN, KY 42104

Title: DC ( ) Delete
Name: ADAMS, STEVE
Address: 650 THREE SPRINGS RD
City-St-Zip: BOWLING GREEN, KY 42102

Title: VP ( ) Delete
Name: MARSHALL, KEN
Address: 650 THREE SPRINGS RD
City-St-Zip: BOWLING GREEN, KY 42102

Title: T (X) Delete
Name: SMITH, DON
Address: 650 THREE SPRINGS RD
City-St-Zip: BOWLING GREEN, KY 42104

Title: P ( ) Delete
Name: LEMONIS, MARCUS
Address: 650 THREE SPRINGS RD
City-St-Zip: BOWLING GREEN, KY 42104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPF (X) Change ( ) Addition
Name: SMITH, DON
Address: 650 THREE SPRINGS RD
City-St-Zip: BOWLING GREEN, KY 42102

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 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: DONALD P. SMITH VPF 04/20/2009

Electronic Signature of Signing Officer or Director — Date