

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P13939** (4)
1. Corporation Name
FLEETWOOD CREDIT CORP.



Principal Place of Business: **22840 SAVI RANCH PARKWAY P.O. BOX 87024 YORBA LINDA CA 92686-7024**
Mailing Address: **22840 SAVI RANCH PARKWAY P.O. BOX 87024 YORBA LINDA CA 92686-7024**

3. Date Incorporated or Qualified: **04/07/1987**
3a. Date of Last Report: **01/31/1995**
4. FEI Number: **33-0145314**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when changing office)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KUMMER, GLENN F.	
STREET ADDRESS	3125 MYERS STREET	
CITY-STATE-ZIP	RIVERSIDE CA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WEIDE, WILLIAM M.	
STREET ADDRESS	3125 MYERS STREET	
CITY-STATE-ZIP	RIVERSIDE CA	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	RUNYON, MARVIN T. III	
STREET ADDRESS	22840 SAVI RANCH PARKWAY	
CITY-STATE-ZIP	YORBA LINDA CA	
TITLE	VCS	<input type="checkbox"/> DELETE
NAME	WESSEL, LAWRENCE E.	
STREET ADDRESS	22840 SAVI RANCH PARKWAY	
CITY-STATE-ZIP	YORBA LINDA CA	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	CREAN, JOHN C.	
STREET ADDRESS	3125 MYERS STREET	
CITY-STATE-ZIP	RIVERSIDE CA	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	PITTROFF, LAWRENCE F.	
STREET ADDRESS	22840 SAVI RANCH PARKWAY	
CITY-STATE-ZIP	YORBA LINDA CA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard de la Pena* **Richard de la Pena** 01/26/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

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ADDITIONAL OFFICERS

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>
General Counsel & Secretary	Richard de la Peña	22840 Savi Ranch Pkwy. Yorba Linda, CA
VP-Operations	Donald W. Kaczor	22840 Savi Ranch Pkwy. Yorba Linda, CA

Fleetwood Credit Corp.
22840 Savi Ranch Parkway
P.O. Box 87024
Yorba Linda, California 92686-8724
(714) 921-3400

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Quality Above All

FLEETWOOD CREDIT CORP.

February 12, 1996

Division of Corporations
Annual Reports Section
P.O. Box 13900
Tallahassee, FL 32317

Re: Florida Annual Report
FLEETWOOD CREDIT CORP.

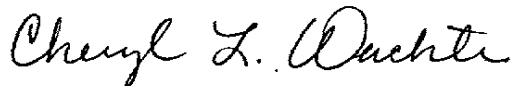
Dear Sir or Madam:

Fleetwood Credit Corp, a California corporation, hereby submits its duly-completed Florida Annual Report together with the following:

- (i) an additional Officer Listing;
- (ii) a check made payable to the Secretary of State in the amount of \$200.00.

If you have any questions, you may contact me at your convenience at (714) 921-3437.

Sincerely,



Cheryl L. Wachter
Senior Paralegal

Enclosures