

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

**May 13 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P31731 (3)
1. Corporation Name
FLEETWOOD TRAVEL TRAILERS OF MARYLAND, INC.



Principal Place of Business
**3125 MYERS STREET
RIVERSIDE CA 92503-5527**

Mailing Address
**3125 MYERS ST. PO BOX 7638
ATTN: TAX DEPT
RIVERSIDE CA 92531-7638
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/09/1980

21	2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	52-0892953	Not Applicable
22	City & State	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	C/CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CREAN, JOHN C.	1.2 NAME	KUMMER, GLENN F.
STREET ADDRESS	3125 MYERS ST	1.3 STREET ADDRESS	3125 MYERS ST
CITY-ST-ZIP	RIVERSIDE CA	1.4 CITY-ST-ZIP	RIVERSIDE CA 92503
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	P/COO/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KUMMER, GLENN F.	2.2 NAME	POTTER, NELSON W.
STREET ADDRESS	3125 MYERS ST	2.3 STREET ADDRESS	3125 MYERS ST
CITY-ST-ZIP	RIVERSIDE CA	2.4 CITY-ST-ZIP	RIVERSIDE CA 92503
TITLE	VAS <input type="checkbox"/> DELETE	3.1 TITLE	V/AS/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BINGHAM, PAUL M.	3.2 NAME	BINGHAM, PAUL M.
STREET ADDRESS	3125 MYERS ST	3.3 STREET ADDRESS	3125 MYERS ST
CITY-ST-ZIP	RIVERSIDE CA	3.4 CITY-ST-ZIP	RIVERSIDE CA 92503
TITLE	V <input checked="" type="checkbox"/> DELETE	4.1 TITLE	V/S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NORD, JON A.	4.2 NAME	LEAR, WILLIAM H.
STREET ADDRESS	3125 MYERS ST	4.3 STREET ADDRESS	3125 MYERS ST
CITY-ST-ZIP	RIVERSIDE CA	4.4 CITY-ST-ZIP	RIVERSIDE CA 92503
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	BETCHER, CARL D.
STREET ADDRESS		5.3 STREET ADDRESS	3125 MYERS ST.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	RIVERSIDE CA 92503
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	T/AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	LARKIN, LYLE N.
STREET ADDRESS		6.3 STREET ADDRESS	3125 MYERS ST
CITY-ST-ZIP		6.4 CITY-ST-ZIP	RIVERSIDE CA 92503

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E034 (10/97)

**FLEETWOOD TRAVEL TRAILERS OF MARYLAND, INC.
OFFICERS AND DIRECTORS OF
TRAVEL TRAILERS SUBSIDIARIES OF
FLEETWOOD ENTERPRISES, INC.**

Glenn F. Kummer

Nelson W. Potter

Mallory S. Smith

Richard E. Parks

Paul M. Bingham

William H. Lear

Carl D. Betcher

Lyle N. Larkin

Chairman of the Board and

Chief Executive Officer

President, Chief Operating

Officer and Director

Senior Vice President - Housing Group

Senior Vice President - RV Group

Senior Vice President - Finance

Assistant Secretary and Director

**Vice President - General Counsel and Secretary
and Director**

Vice President - Travel Trailer Division

Treasurer and Asst. Secretary

**ALL CORRESPONDENCE DIRECTED TO ANY OF THE
ABOVE SHOULD BE ADDRESSED AS FOLLOWS:**

**P. O. BOX 7638
RIVERSIDE, CA 92513-7638**

1/13/98