

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90265 005 \*\*\*150.00

|                                                     |                                                                                   |
|-----------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # P14817</b>                            |  |
| 1. Entity Name<br><b>CHAMPION HOME BUILDERS CO.</b> |                                                                                   |

|                                                                                                  |                                                                                      |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Principal Place of Business<br><b>2701 CAMBRIDGE CT<br/>SUITE 300<br/>AUBURN HILLS, MI 48326</b> | Mailing Address<br><b>2701 CAMBRIDGE CT<br/>SUITE 300<br/>AUBURN HILLS, MI 48326</b> |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|

40077572



|                                                |         |                     |         |
|------------------------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business - No P.O. Box # |         | 3. Mailing Address  |         |
| Suite, Apt. #, etc.                            |         | Suite, Apt. #, etc. |         |
| City & State                                   |         | City & State        |         |
| Zip                                            | Country | Zip                 | Country |

01042007 Chg-P CR2E034 (12/06)

|                                    |                                                        |
|------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>38-2744984</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|------------------------------------|--------------------------------------------------------|

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

|                                                                                                                                       |  |                                                    |  |
|---------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------|--|
| 6. Name and Address of Current Registered Agent<br><b>CT CORPORATION SYSTEM<br/>1200 S. PINE ISLAND ROAD<br/>PLANTATION, FL 33324</b> |  | 7. Name and Address of New Registered Agent        |  |
|                                                                                                                                       |  | Name                                               |  |
|                                                                                                                                       |  | Street Address (P.O. Box Number is Not Acceptable) |  |
|                                                                                                                                       |  | City                                               |  |
|                                                                                                                                       |  | FL Zip Code                                        |  |

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

| 10. OFFICERS AND DIRECTORS                     |                                                                                                                               | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |                                                                                                                                                         |
|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>WILLIAMS, BJ<br>2701 CAMBRIDGE CT SUITE 300<br>AUBURN HILLS, MI 48326 <input type="checkbox"/> Delete                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VSD<br>COLLINS, JOHN J JR<br>2701 CAMBRIDGE CT SUITE 300<br>AUBURN HILLS, MI 48326 <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | T<br>KNIGHT, PHYLLIS A<br>2701 CAMBRIDGE CT SUITE 300<br>AUBURN HILLS, MI 48326 <input type="checkbox"/> Delete               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>BRYANT, C EDGAR<br>2701 CAMBRIDGE CT SUITE 300<br>AUBURN HILLS, MI 48326 <input checked="" type="checkbox"/> Delete     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | VP<br>William H. Stamer<br>2701 Cambridge Ct #300<br>Auburn Hills MI 48326 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | AT<br>PAUL, JIMMY<br>2701 CAMBRIDGE CT SUITE 300<br>AUBURN HILLS, MI 48326 <input type="checkbox"/> Delete                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete                                                                                               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                       |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jimmy Paul

1/8/07

Date

248-340-7135

Daytime Phone #

ATTACHMENT 40077572  
# P14817  
CHAMPION HOME BUILDERS CO.

BOARD OF DIRECTORS

Phyllis A. Knight

OFFICERS

| <u>Name</u>        | <u>Title</u>                                   |
|--------------------|------------------------------------------------|
| BJ Williams        | President                                      |
| William H. Stamer  | Vice President                                 |
| Vacant             | Vice President, Secretary &<br>General Counsel |
| Richard Hevelhorst | Vice President & Controller                    |
| Phyllis A. Knight  | Executive Vice President / CFO                 |
| Jimmy Paul         | Assistant Treasurer                            |
| Kevin Goethals     | Assistant Treasurer                            |

ADDRESS

The address for all of the above individuals is:

2701 Cambridge Court, Suite 300  
Auburn Hills, MI 48326