

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 544013

FILED
Sep 12, 2007
Secretary of State

Entity Name: LAZY DAYS' R.V. CENTER, INC.

Current Principal Place of Business:

6130 LAZY DAYS BLVD
SEFFNER, FL 335842968

New Principal Place of Business:

Current Mailing Address:

6130 LAZY DAYS BLVD
SEFFNER, FL 335842968

New Mailing Address:

FEI Number: 59-1764794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OEHLER, HAROLD D.
GENERAL COUNSEL
6130 LAZY DAYS BLVD.
SEFFNER, FL 335842968 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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: STEPHENS, LINDA
Address: 6130 LAZY DAYS BLVD.
City-St-Zip: SEFFNER, FL 33584

Title: P () Delete
Name: HORTON, JOHN
Address: 6130 LAZY DAYS BLVD.
City-St-Zip: SEFFNER, FL 33584

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: LAY, RANDALL
Address: 6130 LAZY DAYS BLVD.
City-St-Zip: SEFFNER, FL 33584

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: LINDA STEPHENS

S

09/12/2007

Electronic Signature of Signing Officer or Director

Date