

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90196 021 ***150.00

DOCUMENT # 592142

1. Entity Name

FLEETWOOD HOLIDAYS, INC.

Principal Place of Business

Mailing Address

**C/O FLEETWOOD ENTERPRISES INC
 3125 MYERS ST. PO BOX 7638
 RIVERSIDE CA 92513-7638
 US**

**C/O FLEETWOOD ENTERPRISES INC
 3125 MYERS ST. PO BOX 7638
 RIVERSIDE CA 92513-7638
 US**

00053280



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **95-3406951**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CCEO** ☐ Delete
 NAME **KUMMER, G F**
 STREET ADDRESS **3125 MYERS, ST**
 CITY-ST-ZIP **RIVERSIDE CA 92513-7638**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PCD** ☐ Delete
 NAME **POTTER, N W**
 STREET ADDRESS **3125 MYERS STREET**
 CITY-ST-ZIP **RIVERSIDE CA 92503**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VASD** ☒ Delete
 NAME **BINGHAM, PAUL M**
 STREET ADDRESS **3125 MYERS ST, BOX 7638**
 CITY-ST-ZIP **RIVERSIDE CA 92513-7638**

TITLE **VASD** ☐ Change ☒ Addition
 NAME **BOYD R. PLOWMAN**
 STREET ADDRESS **3125 MYERS ST, Box 7638**
 CITY-ST-ZIP **RIVERSIDE CA 92513-7638**

TITLE **VSD** ☒ Delete
 NAME **LEAR, WILLIAM H.**
 STREET ADDRESS **3125 MYERS ST, BOX 7638**
 CITY-ST-ZIP **RIVERSIDE CA 92513-7638**

TITLE **VSD** ☐ Change ☒ Addition
 NAME **FORREST D. THEOBALD**
 STREET ADDRESS **3125 MYERS ST, Box 7638**
 CITY-ST-ZIP **RIVERSIDE CA 92513-7638**

TITLE **VTAS** ☐ Delete
 NAME **LARKIN, LYLE N.**
 STREET ADDRESS **3125 MYERS ST, BOX 7638**
 CITY-ST-ZIP **RIVERSIDE CA 92513-7638**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LYLE LARKIN

VP-TREASURER

Date

4/25/01

Daytime Phone #

(909) 351-3797

CR2E034 (10/00)

FLEETWOOD HOLIDAYS INC.

OFFICERS & DIRECTORS

Glenn F. Kummer
Nelson W. Potter
Charles A. Wilkinson
Carl D. Betcher
Boyd R. Plowman
Forrest D. Theobald
Lyle N. Larkin

Chairman of the Board & Chief Executive Officer
President, Chief Operating Officer
Sr. Vice President - Housing Group
Sr. Vice President - RV Group
Sr. Vice President - Finance and Assistant Secretary
Vice President - General Counsel and Secretary
Vice President - Treasurer and Assistant Secretary

DIRECTORS:

Glenn F. Kummer
Nelson W. Potter
Boyd R. Plowman
Lyle N. Larkin

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

P. O. BOX 7638
RIVERSIDE, CA 92513-7628

4/16/01.

Attachment
~~#~~ 592142
00053280