


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90414 004 ***150.00

DOCUMENT # 592142 1. Entity Name FLEETWOOD HOLIDAYS, INC.					
Principal Place of Business C/O FLEEWOOD ENTERPRISES INC 3125 MYERS ST, PO BOX 7638 RIVERSIDE, CA 42513-7638 US			Mailing Address C/O FLEEWOOD ENTERPRISES INC 3125 MYERS ST, PO BOX 7638 RIVERSIDE, CA 42513-7638 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address C/O FLEETWOOD ENTERPRISES, INC. ATTN: TAX DEPT, P.O. BOX 7638			
City & State Zip Country		City & State RIVERSIDE, CA 92513-7638 Zip Country		4. FEI Number 95-3406951 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		01042007 Chg-P CR2E034 (12/06)			
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO PLOWMAN, BOYD R 3125 MYERS ST RIVERSIDE, CA 925137638 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFOD BOYD R. PLOWMAN 3125 MYERS ST. RIVERSIDE CA 92503 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTAS LARKIN, LYLE N. 3125 MYERS ST, BOX 7638 RIVERSIDE, CA 925137638 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPTD LYLE N. LARKIN 3125 MYERS ST RIVERSIDE CA 92503 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD MCGILL, LEONARD J 3125 MYERS ST RIVERSIDE, CA 925137638 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCEO SMITH, ELDEN L 3125 MYERS ST RIVERSIDE, CA 925137638 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 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: LYLE N. LARKIN <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/20/07 951-351-3797 <small>Date Daytime Phone #</small>		

40089313



ATTACHMENT 40089313

#592142

FLEETWOOD HOLIDAYS INC.

OFFICERS & DIRECTORS

Elden L. Smith
Boyd R. Plowman
Leonard J. McGill
Lyle N. Larkin

President & Chief Executive Officer
Executive Vice President – Chief Financial Officer
Sr. Vice President - General Counsel and Secretary
Vice President - Treasurer and Assistant Secretary

DIRECTORS:

Elden L. Smith
Boyd R. Plowman
Leonard J. McGill
Lyle N. Larkin

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

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

4/25/05