

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90262 009 ***150.00

NR7000 AR

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **95-3406951**

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

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. 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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

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	VASD	<input type="checkbox"/> Delete
NAME	PLOWMAN, BOYD R	
STREET ADDRESS	3125 MYERS ST, BOX 7638	
CITY-ST-ZIP	RIVERSIDE CA 92513-7638	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	THEOBALD, FORREST D	
STREET ADDRESS	3125 MYERS ST, BOX 7638	
CITY-ST-ZIP	RIVERSIDE CA 92513-7638	
TITLE	VTAS	<input type="checkbox"/> Delete
NAME	LARKIN, LYLE N.	
STREET ADDRESS	3125 MYERS ST, BOX 7638	
CITY-ST-ZIP	RIVERSIDE CA 92513-7638	
TITLE	V	<input type="checkbox"/> Delete
NAME	CHARLES, WILKINSON	
STREET ADDRESS	3125 MYERS ST.	
CITY-ST-ZIP	RIVERSIDE CA 92513	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	CFO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLOWMAN, BOYD R.	
STREET ADDRESS	3125 MYERS ST., P.O. BOX 7638	
CITY-ST-ZIP	RIVERSIDE CA 92513-7638	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARDILL, EDWARD D.	
STREET ADDRESS	3125 MYERS ST., P.O. BOX 7638	
CITY-ST-ZIP	RIVERSIDE CA 92513-7638	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LYLE N. LARKIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/03 (909) 351-3797
Date Daytime Phone #

CR2E034 (10/02)

90104993

ATTACHMENT
592142

FLEETWOOD HOLIDAYS INC.

OFFICERS & DIRECTORS

Edward B. Caudill	President & Chief Executive Officer
Charles A. Wilkinson	Executive Vice President – Operations
Boyd R. Plowman	Executive Vice President – Chief Financial Officer
Forrest D. Theobald	Sr. Vice President - General Counsel and Secretary
Lyle N. Larkin	Vice President - Treasurer and Assistant Secretary

DIRECTORS:

Edward B. Caudill
Charles A. Wilkinson
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

9/10/02