2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL KEPUK I												
DOCUMENT # F0100004226 1. Entity Name HARLEY-DAVIDSON MOTOR COMPANY OPERATIONS, INC.							FILED 09 JAN 18 PM 1:56					
									a Lien	1 Lr 31	ATE	
Principal Place of Business 3700 WEST JUNEAU AVENUE MILWAUKEE, WI 53208			Mailing Address 3700 WEST JUNEAU AVENUE MILWAUKEE, WI 53208							r Er Si, FE, FLO		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address					 				
Suite. Apt. #, etc.			Suite, Apt. #, etc.				01092008	Chg-P	CR2E0	34 (12/06)		
City & State			City & State				4. FEI Number 39-1972			_ 	plied For t Applicable	
Zip	Country		Zip Count		ntry		5. Certificate of	of Status Desired		\$8.75 Add Fee Requires		
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					Name Street Address (P.O. Box Number is Not Acceptable)							
PLANTATI	ION, FL 3	3324										
				City					FL	Zip Code	9	
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, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees												
10.		OFFICERS AND I	DIRECTORS	11.			ADDITIONS/C	CHANGES TO OFFI	CERS AND	DIRECTORS	S IN 11	
TITLE	CEOD Delat			TITLE		VP/T □ C GLASSGOW, PERRY A.				Change	XX Addition	
NAME STREET ADDRESS	ZIEMER, JAMES L 3700 WEST JUNEAU AVENUE				BE EET ADDRESS	3700) WEST JUNE	AU AVENUE				
CITY-ST-ZIP	MILWAUKEE, WI 53208				'-SI-ZIP	MILV	MAUKEE, WI	53208				
TITLE	PRES Delete IIILE						1 1	101163	200	Change	Addition	
NAME STREET ADDRESS	MCCASLIN, JAMES 3700 WEST JUNEAU AVENUE				1E EET ADDRESS		01/29	0 0116 3 70801039	02 <u>0</u>	**866	. 25	
CITY - ST-ZIP	5.0020. 00				·SI-ZIP		\					
TITLE	VP/T Delete TITLE						h			☐ Change	☐ Addition	
NAME STREET ADDRESS	BROSTOWITZ, JAMES M 3700 WEST JUNEAU AVENUE STRI				NE Eet address		W1/1/23					
CITY-ST-ZIP	MILWAU	-SI-ZIP		, ,								
TITLE	VP/S Delete IIII									☐ Change	☐ Addition	
NAME STREET ADDRESS	LIONE, GAIL A 3700 WEST JUNEAU AVENUE NAME SIN				1E EET ADDRESS							
CITY-ST-ZIP		KEE, WI 53208			1-\$1-ZIP							
TITLE	AS Delete TITE			- 1					☐ Change	☐ Addition		
NAME STREET ADDRESS	CALAWAY, TONIT M 3700 WEST JUNEAU AVENUE SIR				EET ADDRESS							
CITY-ST-ZIP	MILWAUKEE, WI 53208					_						
TITLE			☐ Delete	TITU						☐ Change	Addition	
NAME STREET ADDRESS				NAM SIRE	ME EET ADDRESS						1	
CITY-ST-ZIP				CITY	r-S1-ZIP							
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: Comparison 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 the corporation or the receiver or trustee empowered. SIGNATURE												
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