

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

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

04-30-2007 90414 005 \*\*\*150.00

**DOCUMENT # F04000006997**

1. Entity Name  
**FLEETWOOD HOMES OF NORTH CAROLINA, INC.**



Principal Place of Business  
**349 EAST RAILROAD STREET  
PEMBROKE, NC 28372**

Mailing Address  
**PO BOX 7638  
ATTN: TAX DEPT  
RIVERSIDE, CA 92513-7638**

**40089312**



01042007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address		4. FEI Number <b>59-1295435</b>		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
City & State		City & State					
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent			
Name							
Street Address (P.O. Box Number is Not Acceptable)							
City				<b>FL</b>		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, 2007 Fee will be \$550.00**

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 NAME STREET ADDRESS CITY-ST-ZIP	PCOD SMITH, ELDEN L 3125 MYERS STREET RIVERSIDE, CA 92503	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEOD ELDEN L. SMITH 3125 MYERS ST RIVERSIDE CA 92503	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MGGILL, LEONARD J 3125 MYERS STREET RIVERSIDE, CA 92503	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTD LYLE N. LARKIN 3125 MYERS ST RIVERSIDE CA 92503	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC FLOWMAN, BOYD R 3125 MYERS STREET RIVERSIDE, CA 92503	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPCFOD 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	VPH BREWER, RON 33125 MYERS ST RIVERSIDE, CA 92503	<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	EVPD PLOWMAN, BOYD R 3125 MYERS STREET RIVERSIDE, CA 92503	<input checked="" 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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/20/07** **951-351-3797**  
Date Daytime Phone #

ATTACHMENT 40089312

~~FF 0400000997~~

**FLEETWOOD HOMES OF NORTH CAROLINA, INC.  
OFFICERS AND DIRECTORS OF  
MANUFACTURED HOUSING SUBSIDIARIES OF  
FLEETWOOD ENTERPRISES, INC.**

Elden L. Smith  
Boyd R. Plowman

Charles E. Lott  
Leonard J. McGill

Ron Brewer  
Lyle N. Larkin

President & Chief Executive Officer  
Executive Vice President & Chief Financial Officer  
and Assistant Secretary  
Executive Vice President  
Sr. Vice President - General Counsel and  
Secretary  
Vice President – Housing Operations  
Vice President - Treasurer and Asst. 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 92513-7638**

4/25/05