

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000002303 (6)

1. Corporation Name

MONACO COACH CORPORATION

Principal Place of Business

91320 COBURG INDUSTRIAL WAY
COBURG OR 97408
US

Mailing Address

91320 COBURG INDUSTRIAL WAY
COBURG OR 97408
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

05/14/1993

4. FEI Number

35-1880244

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D KLUGER, MICHAEL J
STREET ADDRESS 18 MOHAWK TRAIL ST., #13
CITY-ST-ZIP REDDING CT

TITLE ☐ DELETE

NAME SV NEPUTE, JOHN
STREET ADDRESS 1491 WIMBLEDON PL
CITY-ST-ZIP SPRINGFIELD OR

TITLE ☐ DELETE

NAME V SHELDON, JAMES V.
STREET ADDRESS 51291 HIDDEN PINES COURT
CITY-ST-ZIP ORANGER IN

TITLE ☐ DELETE

NAME S BOND, RICHARD
STREET ADDRESS 2210 EAST JACKSON BLVD
CITY-ST-ZIP ELKHART IN

TITLE ☒ DELETE

NAME P ROBERTSON, D. PAGE
STREET ADDRESS 1780 CAMBRIDGE OAKS
CITY-ST-ZIP EUGENE OR

TITLE ☐ DELETE

NAME C TOOLSON, K.L.
STREET ADDRESS 51818 OAK BROOK
CITY-ST-ZIP ORANGER IN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard Bond

Richard Bond

1/19/98

218-862-7575

CR2E034 (10/97)