

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91872 028 ***150.00

DOCUMENT # F93000002303

1. Entity 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**

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 **35-1880244**

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

**C T CORPORATION
1200 SOUTH PINE ISLAND RD.
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 **D** ☐ Delete
NAME **VANDENBERG, ROGER A**
STREET ADDRESS **THE THOMAS HOUSE 188 BENEFIT ST**
CITY-ST-ZIP **PROVIDENCE RI 02903-1205**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☐ Delete
NAME **NEPUTE, JOHN**
STREET ADDRESS **91320 COBURG INDUSTRIAL WAY**
CITY-ST-ZIP **COBURG OR 97408**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ROUSE, RICHARD A**
STREET ADDRESS **275 E HILLCREST DR STE 203**
CITY-ST-ZIP **THOUSAND OAKS CA 91360**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **25919 Dark Creek Road**
CITY-ST-ZIP **Calabasas, CA 91302**

TITLE **VS** ☐ Delete
NAME **BOND, RICHARD**
STREET ADDRESS **606 NELSON'S PKWY**
CITY-ST-ZIP **WAKARUSA IN 46573**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CD** ☐ Delete
NAME **TOOLSON, KAY**
STREET ADDRESS **91320 COBURG INDUSTRIAL WAY**
CITY-ST-ZIP **COBURG OR 97408**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **RING, JR, CARL E**
STREET ADDRESS **1177 AVENUE OF THE AMERICAS**
CITY-ST-ZIP **NEW YORK NY 10036**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1370 Avenue Of The Americas-34th, FL**
CITY-ST-ZIP **New York, NY 10019-4602**

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-03 541-686-8011
Date Daytime Phone #

CR2E034 (10/02)

Attachment to # F93000002303
20040573

Monaco Coach Corporation
Florida Uniform Business Report
11. Additions/Changes to Officers and Directors

Title	Name of Director	Street Address	City	State	Zip Code
D	Robert P. Hanafee, Jr.	Zero Main Street	Marion	MA	02738
D	Dennis D. Oklak	600 East 96 th Street	Indianapolis	IN	46240
D	L. Ben Lytle	120 Monument Circle	Indianapolis	IN	46244
VT	P. Martin Daley	91320 Coburg Industrial Way	Coburg	OR	97408