2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G42895

FILED Dec 22, 2009 Secretary of State

Entity Name: WHEELED COACH INDUSTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 2737 N FORSYTH RD WINTER PARK, FL 32792 US **Current Mailing Address: New Mailing Address:** 2737 N FORSYTH RD WINTER PARK, FL 32792 US FEI Number: 59-2309315 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BARNES, SCOTT L COLLINS, ROBERT L Name: Name: 2001 VANDERBILT POINT 210 SHELL POINT EAST Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: MAITLAND, FL 32751 Title: VTSD Title: () Delete () Change () Addition Name: BECKER, JOHN Name: 588 SE VISTA DR Address: Address: NEWPORT, OR 97365 City-St-Zip: City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition HEINSEN, HANS HEINSEN, HANS Name: Name: 15 COMPOUND DR 15 COMPOUND DR Address: Address: City-St-Zip: HUTCHINSON, KS 67502 City-St-Zip: HUTCHINSON, KS 67502 Title: () Delete Title: () Change () Addition QUICKE, JOHN Name: Name: Address: 11 STONEY HOLLOW RD Address: City-St-Zip: CHAPPAQUA, NY 10514 City-St-Zip: Title: Title: () Delete () Change () Addition KERMES, KENNETH Name: Name: 26 E. HILL WAY Address: Address: City-St-Zip: WAKEFIELD, RI 02879 City-St-Zip: Title: () Delete Title: (X) Change () Addition JAMES, HENDERSON BARNES, SCOTT L Name: Name: 203 E. JEFFERSON ST 2001 VANDERBILT POINT Address: Address: City-St-Zip: FALLS CHURCH, VA 22046 City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT L. BARNES VP 12/22/2009