

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 20, 2008 8:00 am**  
**Secretary of State**

05-20-2008 90004 013 \*\*\*150.00

**DOCUMENT # P31731**

1. Entity Name  
**FLEETWOOD TRAVEL TRAILERS OF MARYLAND, INC.**



Principal Place of Business  
**3125 MYERS STREET  
RIVERSIDE, CA 92503-5527**

Mailing Address  
**3125 MYERS ST, PO BOX 7638  
ATTN: TAX DEPT  
RIVERSIDE, CA 92513 US**

**40104338**



01072008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**52-0892953**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOD PLOWMAN, BOYD R 3125 MYERS ST RIVERSIDE, CA 92513
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD MCGILL, LEONARD J 3125 MYERS ST RIVERSIDE, CA 92503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS LARKIN, L N 3125 MYERS ST RIVERSIDE, CA 92503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO SMITH, ELDEN L 3125 MYERS ST RIVERSIDE, CA 92503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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**  
**VP-TREASURER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/21/08**  
Date

**951-351-3797**  
Daytime Phone #

ATTACHMENT 40104338  
# P31731

FLEETWOOD TRAVEL TRAILERS OF MARYLAND, INC.  
OFFICERS AND DIRECTORS OF  
FLEETWOOD RV SUBSIDIARIES

Elden L. Smith  
Boyd R. Plowman

Paul C. Eskritt  
Leonard J. McGill

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 - 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

1/4/07