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	NOW: FILING FEE	AFT											
CORF ANNU	PORATION AL REPORT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State										
1996 DIVISION OF CORPORATIONS													
DOCUN I. Corporation		7	(O)										
UNISER	RV, INC.												
Principal Place	of Business	M	la-ling Address	,				10311031103 11101				IN BUBUL BABUL A	161
ONE SOUTHV	VIRE DR. I GA 30117-4454	ONE SOUTHWIRE DR. CARROLLTON GA 30117-4454											
							,	 Date Incorporated or 10/07/1991 	Qualified		te of Last 04/18/1	•	
2. Principal Plac	ce of Business	28	. Mailing Address					4. FEI Number			ו נטו נדיט	Applied Fo	r
1		26						58-1172327				Not Applica	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status D	esired			5 Additiona Required	tl .
City & State			City & State				6. Election Campaign Fir	-			00 May Be		
Zip Country			Zip Country					Trust Fund Contribution 8. This corporation has I				ed to Fees s 199.032,	
4	25	29	- 	30				Florida Statutes		s 🔲 No			
	9. Name and Address of Current	t Hegis	stered Agent		81	Namo	1	0. Name and Address	of New	Registere	d Agent		
CT COR	PORATION SYSTEM				82	L	dessa	(P.O. Box Number is Not	Accorto	ıbla)			
1200 S.	PINE ISLAND RD.					Street At	Juless	W.C. DOX 140/1Del 15 140/	Accepta				
PLANTA'	TION FL 33324				83								
					84	City				F	L 85 2	rp Code	
or registere	the provisions of Sections 607.0502 d agent, or both, in the State of Florid , and accept the obligations of, Section	la. Suc	h change was authorized	, the abo I by the	corp	named corp oration's be	poration oard of	n submits this statement f directors. I hereby accep	for the pu of the app	urpose of o pointment a	hanging its as registere	registered o d agent. I a	office n
SIGNATURE			•									111 MARIE 11 MARIE 18	
	Ignature, typed or printed name of registered agent; a OFFICERS AND			Hogisteres	l Ager	t signatura requ	uirea whe	n reinstating) ADDITIONS/CHANGE	S TO OF	DATE FICERS AN	ID DIRECT	ORS IN 12	
TITLE	DCP		DELETE	1.11	ITLE	T	DP	Abbillordional	0100	I IOLIIO PA	Change		ion
NAME :	RICHARDS, JAMES C.			1.2 N	AME		Robe	ert Glenn Man		r.			
STREET ADDRESS	ONE SOUTHWIRE DR.							Southwire Dr					
CITY-ST-ZIP	CARROLLTON GA		DELETE					<u>rollton. Geor</u>	gia	30119	[-]		
TITLE NAME	VD Mann, robert Glenn, Jr.		[] beten	2 1 3 2.2 N			VD	D 3. 3 .h			Change	☐ Addit	UII
STREET ADDRESS	ONE SOUTHWIRE DR.			1				y Randolph Southwire Dr					
CITY-ST-ZIP	CARROLLTON GA					T-ZIP	Carı	rollton, Geor	gia	30119			
TITLE	\$		☐ DELETE	3. 1 7	ITLE						☐ Change	Add-t	ion
NAME {	STEPHENS, JOHN C.			3.2 N									
STRÉET ADDRESS	ONE SOUTHWIRE DR.					ADORESS							
CITY-ST-ZIP	CARROLLTON GA		DELETE	3.4 C 4. 1 ³		T-ZIP	T				™ Change	☐ Addit	ion
NAME	RICHARDS, JAMES C.			4.2 N			_	a L. Berry			LAL V-longs	المار ال	
STREET ADDRESS	ONE SOUTHWIRE DR.							Southwire Dr	ive				
CITY-ST-ZIP	CARROLLTON GA			4.4 0	ITY-S			rollton, Geor		30119			
TITLE			DELETE	5.11			D				Change	☐ Addit	ion
NAME				52N				liam V. Hearn					
STREET ADDRESS								SOuthwire Dr		20110			
CITY-\$1-ZIP			CJ DELETE	0.4 0	111-5	T-ZIP (Car1	rollton, Geor	ATG	30119	[] Change	FT Addit	ion

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in change it or on fur algorithms an address.

6.2 NAME

6.3 STREET ADDRESS

64 CITY - ST- ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

John C. Stephens

(770)832-5375