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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P95000068980 (8)

LUKE POTTER WINNEBAGO, INC.

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



Ulsolog

12201 W COLONIAL DR WINTER GARDEN FL 34787		12201 W COLONIAL DR WINTER GARDEN FL 34787					
					DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualified 09/07/1995		
2. Principal Pl	ace of Business	2s. Mading Address		4. FEI Number	A	pplied For	
21		26		59-3334370	N	tot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00) May Be	
23		28		Trust Fund Contribution			
Zip	Country Zip Co		Country	<i>y</i>	8. This corporation owes or has paid the	ne current year Ir	ntangible
24	25	29 3	0		Personal Property Tax due June 30.		□ No
	9. Name and Address of Current	Registered Agent		T	10. Name and Address of New Regist	ered Agent	
	LEN, SIDNEY L III		81	Name			
	O SANLANDO CENTER		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	0 WEST S.R. 434, SUITE 1136			<u> </u>			
LON	NGWOOD FL 32779		83				
			84	City		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 ponted name of registered agent	and title if applicable (NOTE)	Registered Ag	ent signature requ	sired when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	P0	☐ DELETE	1.1 TITLE			L Change	☐ Addition
NAME	POTTER, MICHAEL L		1.2 NAME				
STREET ADDRESS	% 12664 W. COLONIAL DRIVE		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	WINTER GARDEN FL 34787		1.4 CITY-1	ST-ZIP			
TITLE	VD	☐ DELETE	2.1 TITLE			L. Change	
NAME	SCHROTH, CRAIG		22 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	WINTER GARDEN FL 34787			ST-7IP	······································		
TITLE	STD	☐ DELETE	3.1 THLE		•	☐ Change	
NAME	PEMBERTON, SARAH E		3.2 NAME				
STREET ADDRESS	% 12664 W. COLONIAL DRIVE		3.3 STREE	I ADDRESS			
CITY-ST-ZIP	WINTER GARDEN FL 34787		3.4, CITY-	ST-ZIP		[] 01	Addition.
TITLE	NEVNAM BOGED	☑ DELETE	4.1 TITLE			L Change	☐ Addition
NAME	NEAMAN, ROGER		4. 2 NAME	1			
STREET ADDRESS	% 12664 W. COLONIAL DRIVE WINTER GARDEN FL 34787			T ADDRESS			
CITY-ST-ZIP	WHITEN GARDEN FL 34767	DECETE	4.4 CITY	ST-ZIP		Change	☐ Addition
TITLE		☐ DFLETE	5.1 TITLE			Unange (
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY -: 6.1 TITLE	S1-ZIP		Change	Addition
TITLE		CT DECEIF				onongo	- Available
NAME			6.2 NAME				
STREET ADDRESS			I.	1 ADDRESS			
CITY-ST-ZIP	perify that the information supplied with	n this filing does not qualify for	6.4 CITY-		n Section 119.07(3)(i), Florida Statutes. I furt	her certify that th	e information
indicated officer or	on this annual report or supplemental.	annual report is true and accur ver or trustee empowered to ex	rate and th	nat my signat	ure shall have the same legal effect as if ma quired by Chapter 607, Florida Statutes; and	ade under oath; ti	hat I am an