2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 19, 2006 8:00 am Secretary of State DOCUMENT # P97000081982 05-19-2006 90031 012 ***150.00 1. Entity Name CHAMPION TRAILER MANUFACTURING, INC. Principal Place of Business Mailing Address 50019689 1023 GUNN HIGHWAY 16528 N. DALE MABRY HWY ODESSA, FL 33556 TAMPA, FL 33618 rincipal Place of Business 3. Mailing Address Suite, Apt. #, etc. 05162006 CR2E034 (11/05) Chg-P Applied For City & State 4. FEI Number 59-3467498 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SANDERS, WALTER 16528 N. DALE MABRY Street Address (P.O. Box Number is Not Acceptable) TAMPA, FL 33618 City 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 SIGNATURE (NOTE, Registered Agent signature required when reinstating) ited name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 6, 2006 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D ☐ Delete TITLE ☐ Change ☐ Addition CORNETTE ROBERT NAME NAME P.O. BOX 456 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ODESSA, FL 33556 CITY-ST-ZIE TITLE Delete ☐ Change ☐ Addition CORNETTE, ROBERT NAME NAME STREET ADDRESS 1023 GUNN HWY STREET ADDRESS CITY-ST-ZIP ODESSA, FL 33556 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-716 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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:

FILED

Daytime Phone #

ATTACHMENT



Walter S. Sanders & Associates, P.A.

ACCOUNTANT • TAX SPECIALIST • BUSINESS CONSULTANT

May 16, 2006

State of Florida
Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE: Champion Trailer Manufacturing, Inc.

Doc. #P97000081982

Dear Sir or Madam:

Enclosed please find the 2006 for Profit Corporation Annual Report and a check in the amount of \$150.00 for the filing fee for the corporation referenced above. After reviewing our files recently, it was discovered that the original corporation renewal advice mailed from your office was never received at the corporation address. Therefore, the website form was completed and provided herein. Due to circumstances beyond our control, please waive any and all penalties which may apply. Your kind consideration is appreciated.

If you require any further information regarding this specific matter, please feel free to contact this office.

Thank you.

Sincerely,

Walter S. Sanders

WSS/sw