## 2003 FOR PROFIT CORPORATION

## Jan 23, 2003 8:00 am UNIFORM BUSINESS REPORT (UBR) **Secretary of State** P98000002295 DOCUMENT # 01-23-2003 90115 048 \*\*\*150.00 1. Entity Name AL'S MOTOR HOME & TRAILER SALES INC. Principal Place of Business Mailing Address 120 DEL MONTE ST 120 DEL MONTE ST FT. PIERCE FL 34946 FT. PIERCE FL 34946 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-0802999 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BARKER, EVAN A Street Address (P.O. Box Number is Not Acceptable) 2221 50 AV VERO BEACH FL 32960 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Addition TITLE ☐ Delete BEILKE, ALAN NAME NAME 5375 ROTARY ROAD STREET ADDRESS STREET ADDRESS **CHERRY VALLEY IL 61016** CITY-ST-ZIP CITY-ST-ZIP VΡ TITLE ☐ Delete TITLE ☐ Change Addition BEILKE, GAILE NAME NAME STREET ADDRESS 5375 ROTARY RD STREET ADDRESS **CHERRY VALLEY IL 61016** CITY-ST-ZIP CITY-ST-ZIP دي نصل جاء الا TITLE TITLE ☐ Delete Change Change ☐ Addition Barker, evan a NAME NAME 5780 33rd Street 2221 50 AV STREET ADDRESS STREET ADDRESS CITY-ST-ZIP vero Beach FL 32966 CITY-ST-ZIP Change TITLE Delete TITLE Addition NAME NAME BARKER, EVAN A 5780 33rd Street STREET ADDRESS 2221 50 AV STREET ADDRESS CITY-ST-ZIP vero beach FL 32966 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

Delete

Change

☐ Addition

FILED

CR2E034 (10/02)