



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2611
401.222.3044

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 154275	2. Name of Corporation Ritz-Craft Corporation of Pennsylvania, Inc.		
3. Street Address Principal Business Office 15 Industrial Park Road		City Mifflinburg	State PA
		Zip 17844	
4. Business Phone No. 570-966-1053	5. State of Incorporation Pennsylvania		

6. Brief Description of the Character of Business Conducted in Rhode Island
Modular Home Manufacturer

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Paul D. John			Vice President Name Eric W. John		
Street Address 6155 Pleasant Grove Road			Street Address R.R. 1, Box 91		
City Mifflinburg	State PA	Zip 17844	City Winfield	State PA	Zip 17889
Secretary Name Eric W. John			Treasurer Name Eric W. John		
Street Address R.R. 1, Box 91			Street Address R.R. 1, Box 91		
City Winfield	State PA	Zip 17889	City Winfield	State PA	Zip 17889

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Paul D. John			Director Name Eric W. John		
Street Address 6155 Pleasant Grove Road			Street Address R.R. 1, Box 91		
City Mifflinburg	State PA	Zip 17844	City Winfield	State PA	Zip 17889
Director Name Paul R. John			Director Name Donald L. Ritzenthaler		
Street Address 378 Goldengate Point Unit #6			Street Address 7218 Westmoreland Drive		
City Sarasota	State FL	Zip 34236	City Sarasota	State FL	Zip 34243

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
10,000	Comm	\$1,000.00 Par Value	10,000	Issued	1,000

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date **FILED**
Check No. **FEB 11 2008**
By: **233109 mnc**
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature **Jim Staib** Date **1/29/08**
Print or Type Name **Jim Staib**
Title **Accounting Manager**