	State of Rhode	Island	Fee: \$50.00				
	Office of the Secret		1001 \$20100				
	Division Of Busines	s Services					
148 W. River Street							
1636	Providence RI 029 (401) 222-30						
Foreign Business Corpora							
Annual Report							
Filing Period: February 1 - May	/ 1						
	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.							
ANNUAL REPORT YEAR: 202	3						
1. Corporate ID No. <u>0016</u>	79257						
2. Name of Corporation Char	mpion Modular, Inc.						
3. Street Address Principal E	Business Office:						
No. and Street: 755 W BIG BEAVER SUITE 1000							
City or Town: <u>TROY</u>		State: <u>MI</u> Zip: <u>48084</u>	Country: <u>USA</u>				
4. Business Phone No.							
5. State of Incorporation							
State: <u>DE</u>							
	ARTICLE III						
Enter the six digit NAICS Code	e that best describes the prin	nary business conducted b	by the entity.				
Download the list of codes he	re. More information on NAI	<u>CS</u> can be found online.					
<u>321992</u>							
6. Brief Description of the Character of Business Conducted in Rhode Island							
MANUFACTURER OF FACTROY BUILT HOMES & MODULAR BUILDINGS							
7. Names and Addresses of the Officers and Directors:							
All officers and directors must be listed.							
	· · · · · · ·						
Title	Individual Name First, Middle, Last, Suffix	Address, City or Town, State,					
I			`I				

SECRETARY	ROBERT SPENCE	755 W BIG BEAVER SUITE 1000 TROY, MI 48084 USA
VP-CONTROLLER	TIMOTHY BURKHARDT	755 W BIG BEAVER SUITE 1000 TROY, MI 48084 USA
PRESIDENT/CEO	MARK YOST	755 W BIG BEAVER SUITE 1000 TROY, MI 48084 USA
TREASURER/CFO	LAURIE HOUGH	755 W BIG BEAVER SUITE 1000 TROY, MI 48084 USA
DIRECTOR	MARK YOST	755 W BIG BEAVER SUITE 1000 TROY, MI 48084 USA
DIRECTOR	LAURIE HOUGH	755 W BIG BEAVER SUITE 1000 TROY, MI 48084 USA
DIRECTOR	ROBERT SPENCE	755 W BIG BEAVER SUITE 1000 TROY, MI 48084 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized Shares Number of Shares	Outstanding Num of Shares
CWP		\$0.0010	1,000.00	1000

9. 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.

Signed this 27 Day of March, 2023 at 1:31:12 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By ANGELA BOLLINGER

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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