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State of Rhode Island Office of the Secretary of State

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Foreign Business Corporation 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 - ENTER THE CURRENT YEAR **2024**: 2024

- 1. Corporate ID No. <u>001679257</u>
- 2. Name of Corporation Champion Modular, Inc.
- 3. Street Address Principal Business Office:

No. and Street: 755 W BIG BEAVER SUITE 1000

City or Town: TROY State: MI Zip: 48084 Country: USA

- 4. Business Phone No.
- 5. State of Incorporation

State: DE

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.

321992

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	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	

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 Share	Total Authorized	Total Issued and
		Silate	Shares Number of Shares	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 15 Day of April, 2024 at 11:01:37 AM. 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 **KELLY LETTMANN**

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07