

Missouri Public Service Commission  
MANUFACTURED HOUSING AND MODULAR UNITS PROGRAM

2004

**COPY**

**Certificate of Dealer Registration**

TO WHOM IT MAY CONCERN: The dealer shown below has complied with the requirements of Sections 700.090 and 700.455 RSMo, and therefore is registered in the State of Missouri as a Dealer of Manufactured Homes. This certificate is valid until January 15, 2005.

*Issued To*

AMEGA SALES, INC  
111 EASTSIDE DRIVE  
ASHLAND, MO 65010

*DBA*

AMEGA SALES, INC  
111 EASTSIDE DRIVE  
ASHLAND, MO 65010

*Ron Pleus*

Ron Pleus, Manager, Manufactured Housing and Modular Unit Program

**FILED<sup>3</sup>**

JUN 2 5 2004

Missouri Public  
Service Commission

Exhibit No. 6  
Case No(s) MC-2004-0079  
Date 1-2-04 Rptr TV

THIS CERTIFICATION MUST BE PROMINENTLY DISPLAYED

Registration Number: 1011201

Issue date: 1/16/2004



# Application for Manufactured Home or Modular Unit Certificate of Dealer Registration

(Any false statement in this application is a violation of the law and may be punished by fine or imprisonment or both)

Transmittal Number (PSC Office Use Only) <b>4193080491</b>		Check Number (PSC Office Use Only) <b>32306</b>		Check Amount (PSC Office Use Only) <b>\$1,000</b>	
<input type="checkbox"/> New Application <input checked="" type="checkbox"/> Renewal		If Renewal, Registration Number: <b>1011201</b>		<input checked="" type="checkbox"/> Manufactured Home Dealer <input type="checkbox"/> Modular Unit Dealer	
<b>DEALERSHIP INFORMATION</b>				<b>CORPORATE ADDRESS</b>	
Dealership Name <b>AMEGA SALES, INC</b>				Corporate Name <b>AMEGA SALES, INC</b>	
Street Address of Bona Fide Established Place of Business (Not P.O. Box) <b>111 EASTSIDE DRIVE</b>				Address <b>111 EASTSIDE DRIVE</b>	
City <b>ASHLAND</b>	State <b>MO</b>	Zip Code <b>65010</b>	County <b>BOONE</b>	City <b>ASHLAND</b>	State <b>MO</b>
Phone <b>(573) 657-2176</b>	Fax <b>(573) 657-1805</b>	FEIN <b>43 1877378</b>			
E-mail				E-mail	
<b>PREVIOUS DEALERSHIP INFO</b> - Have you previously owned a dealership under a name other than what is listed above? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes IF YES, please list previously owned dealership(s) name & address:					
<b>IMPORTANT NOTE:</b> Pursuant to Chapter 700 RSMo, all books, records, files and other matters required and necessary to conduct the business shall be kept and available for inspection during normal daytime business hours at the bona fide established place of business listed above.					
Type of Ownership <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation				If a Corporation, State of Incorporation <b>Missouri</b>	
<b>IF A CORPORATION, YOU MUST ATTACH</b> <ul style="list-style-type: none"> <li>• Certificate of Good Standing - Call the Secretary of State's Office at 573-751-4153 to obtain.</li> <li>• Statement of No Taxes Due - Call the Department of Revenue at 573-751-9268 to obtain.</li> </ul>					
<b>LIST ALL OWNERS BELOW</b>		If a Partnership, list Name & Address of each partner. If a Corporation, list Names & Addresses of principal officers.			
Name (Last, First, MI)	Home Address	City	State	Zip Code	Social Security #
1. DeLine, Greg	18324 Monroe Rd 1073	Madison	MO	65263	490-60-6477
2. Grant, Rose	111 East Side Dr.	Ashland	MO	65010	323-42-0517
3. DeLine, Kelly	18324 Monroe Rd 1073	Madison	MO	65263	493-68-0398
4.					
<b>UNITS SOLD</b> - Number of units sold in prior 12 months		New <b>81</b>	Used <b>30</b>	List Manufacturers <b>Clayton, Southern, Waverlee, Champion</b>	
<b>FELONY INFORMATION</b>					
Has owner (or any partner, if partnership, or officer, if corporation) within the preceding ten (10) years been convicted in any Federal or State court of a felony relating to the acquisition or transfer of a manufactured home or any other form of property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
If yes, provide the following:	Date	Court	Conviction	Sentence	
<b>MISDEMEANOR INFORMATION</b>					
Has owner (or any partner, if partnership, or officer, if corporation) within the preceding five (5) years been convicted in any Federal or State court of a misdemeanor relating to the acquisition or transfer of a manufactured home or any other form of property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
If yes, provide the following:	Date	Court	Conviction	Sentence	
<b>CERTIFICATION</b>					
I do solemnly affirm and verify that the concern named herein is a bona fide dealer and I have the authority to make the statements contained herein and to sign this application.					
Signature of Owner, Partner or Corporation Officer				Date	
				<b>PRESIDENT RECEIVED</b>	
Please remit this completed application to the address below along with the Registration Fee of \$200.					
Please make all checks payable to the Missouri Director of Revenue.					
<b>JAN 16 2004</b>					

# STATE OF MISSOURI



**COPY**

**Matt Blunt**  
Secretary of State


**CORPORATION DIVISION**  
**CERTIFICATE OF GOOD STANDING**

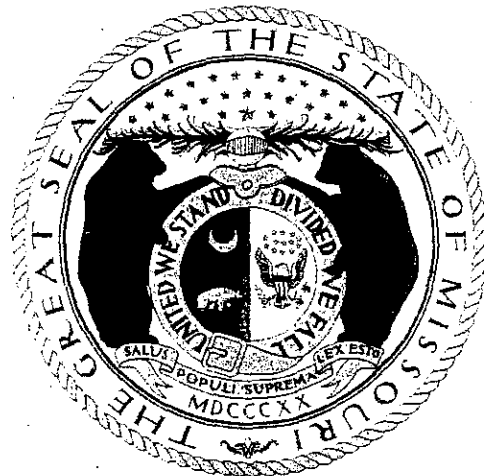
I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

**AMEGA SALES, INC.**  
**00478057**

was created under the laws of this State on the 28th day of December, 1999, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 22nd day of December, 2003

  
Secretary of State



Certification Number: 6293556-1 Page 1 of 1 Reference:

Verify this certificate online at <http://www.sos.mo.gov/businessentity/verification>



STATE OF MISSOURI  
Department of Revenue  
Division of Taxation and Collection

**COPY**

**CERTIFICATE OF NO TAX DUE**

AMEGA SALES INC  
111 EASTSIDE DR  
ASHLAND MO 65010

DATE: JANUARY 14, 2004

MISSOURI TAX ID NUMBER: 17304776

To Whom It May Concern: The Department of Revenue, State of Missouri, certifies that the above listed taxpayer/account has paid all Sales tax due, including penalties and interest, or does not owe any Sales tax, according to the records of the Missouri Department of Revenue, as of November 30, 2003.

This statement of no Sales tax due does not limit the authority of the Director of Revenue to assess and/or collect liabilities under appeal or that become known to the Missouri Department of Revenue as a result of audit or determination of successor liability.

DIRECTOR OF REVENUE OR DELEGATE  
STATE OF MISSOURI

BY:

A handwritten signature in black ink, appearing to read "Kenneth M. Pearson", is written over a horizontal line.

Kenneth M. Pearson  
Administrator  
Business Tax

NK:DU2096

CBN020  
200401400300874

COPY

AMEGA SALES, INC.  
111 EASTSIDE DRIVE  
ASHLAND, MO 65010  
(573) 657-2176

UNION PLANTERS BANK  
Ashland Branch  
601 E. Broadway  
Ashland, MO 65010  
80-482/815

32306

CHECK NO.

032306

Memo: DEALER REGISTRATION

One Thousand and 0/100 Dollars

DATE

AMOUNT

PAY TO THE ORDER OF  
MO DEPT OF REVENUE  
P.O. BOX 840  
JEFFERSON CITY, MO 65105-0840

Jan 14, 2004

\*\*\*\*\*\$1,000.00

*Sherry A. Petrick*  
AUTHORIZED SIGNATURE

⑈032306⑈ ⑆081504826⑆ ⑈9110213902⑈

RECEIVED

JAN 16 2004

INTERNAL ACCOUNTING  
MO. P.S.C