2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31582

FILED Mar 18, 2009 Secretary of State

Entity Name: HALF MOON BAY BY K. HOVNANIAN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7070 HALF MOON CIRCLE HYPOLUXO, FL 33462

Current Mailing Address: New Mailing Address:

GRS MANAGEMENT ASSOC. INC 3900 WOOD BLVD STE 309 LAKE WORTH, FL 33463

FEI Number: 65-0137011 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOLLENGARDEN, PETER
BECKER & POLIAKOFF PA
500 AUST RALIAN AVE SO 9TH
WEST PALM BEACH, FL 33401 US

DIREKTOR, KENNETH
BECKER & POLIAKOFF PA
625 NORTH FLAGLER 7TH FLOOR
WEST PALM BEACH, FL 33401 US

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.

SIGNATURE: KENNETH DIREKTOR 03/18/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 TD3 () Delete
 Title:
 TD3 (X) Change () Addition

 Name:
 SCEPPA, JOHN
 Name:
 SCEPPA, JOHN

 Address:
 108 FL HALMOON CIR
 Address:
 108 FL HALMOON CIR F-1

 City-St-Zip:
 LAKE WORTH, FL 33462
 City-St-Zip:
 LAKE WORTH, FL 33462

Title: VPSD () Delete Title: SD (X) Change () Addition Name: HARTMANN, ALBHAIM Name: HARTMANN, WILLIAM

Address: 110 C-1 HALFMOON CIR Address: 110 C-1 HALFMOON CIR
City-St-Zip: LAKE WORTH, FL 33462 City-St-Zip: LAKE WORTH, FL 33462

Title: PD () Delete Title: () Change () Addition

 Name:
 LEWIS, CHARLES
 Name:

 Address:
 104 B3 HALMOON CIR
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33462
 City-St-Zip:

Title: D () Delete Title: VPD (X) Change () Addition

 Name:
 WEIR, CHARLES
 Name:
 WEIR, CLARENCE

 Address:
 108 B2 HALFMOON CIR
 Address:
 108 B2 HALFMOON CIR

 City-St-Zip:
 HYPOLUXO, FL 33462
 City-St-Zip:
 HYPOLUXO, FL 33462

Title: D () Delete Title: D (X) Change () Addition

 Name:
 LOUSER, DONALD
 Name:
 REDMAN, CHARLES

 Address:
 102 A3 HALFMOON CIR
 Address:
 108 G-3 HALFMOON CIR

 City-St-Zip:
 HYPOLOXO, FL 33462
 City-St-Zip:
 HYPOLOXO, FL 33462

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES LEWIS PD 03/18/2009