

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 07 1996 8:00 am
Secretary of State

DOCUMENT # 843958 (0)

1. Corporation Name

NEW HOMES INVESTMENT PROPERTIES, INC.

Principal Place of Business

Mailing Address

C/O HARMON ASSOCIATES
201 RTE. 17 NORTH 8TH FLOOR
RUTHERFORD NJ 07070

C/O HARMON ASSOCIATES
201 RTE. 17 NORTH 8TH FLOOR
RUTHERFORD NJ 07070

3. Date Incorporated or Qualified
08/21/1979

3a. Date of Last Report
04/04/1995

2. Principal Place of Business

2a. Mailing Address

21 2050 CENTER AVE.

26 2050 CENTER AVE.

4. FEI Number
13-2915960

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 625

27 SUITE 625

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 FORT LEE, N.J.

28 FORT LEE, N.J.

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 07024 25 BERGEN

29 07024 30 BERGEN

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACLAREN, ROBERT I., II
OSBORNE, HANKINS, MACLAREN
998 S. FEDERAL HWY., 2ND FLOOR
BOCA RATON FL 33432

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME HARMON, ROBERT T.
STREET ADDRESS 201 RTE. 17 NORTH
CITY-ST-ZIP RUTHERFORD NJ

TITLE V ☐ DELETE

NAME LOCCISANO, CHARLES
STREET ADDRESS 201 RTE. 17 NORTH
CITY-ST-ZIP RUTHERFORD NJ

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

Date

Daytime Phone #

2-1-96 201-585-0630

CR2E034 (12/95)