PLEASE READ ALL INSTRUCTIONS CAREFULLY

APPLICATION FOR REINSTATEMENT

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

FILED
00 OCT 23 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000000768

1. Corporation Name
K. HOVNANIAN MORTGAGE, INC.

Principal Place of Business	Mailing Address
225 Highway 35 2nd Floor Red Bank, NJ 07701 US	225 Highway 35 2nd Floor Red Bank, NJ 07701 US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 2/15/96

5. FEI Number: 22-1470679 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City, State, Zip
		300003441708--7 10/27/00--01019--003 ****758.75	****758.75
Pres	Dan Klinger	1800 S. Australian Ave. #400	West Palm Beach, FL 334 09
VP	Robert Voskovitch	1800 S. Australian Ave. #400	West Palm Beach, FL 33409
VP	Terri Dunn	1800 S. Australian Ave. #400	West Palm Beach, FL 33409
VP	William Barron	225 Highway 35, 2nd floor	Red Bank, NJ 07701
AVP	Christine Bailey	225 Highway 35, 2nd floor	Red Bank, NJ 07701

8. Name and Address of Current Registered Agent

Steven G. Brannock
1800 S. Australian Ave., #402
West Palm Beach, FL 33409

9. Name and Address of New Registered Agent

Name: REINSTATEMENT 00 OCT 23 AM 11:12
Street Address (P.O. Box Number is Not Acceptable):
Suite, Apt. #, Etc.:
City: State: FL Zip Code:

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Steven G. Brannock — REGISTERED AGENT MUST SIGN — Date: 10/11/00

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☑ (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director of the reinstated or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE