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FILED
Mar 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # G16576 (2)

1. Corporation Name
HOVNANIAN OF PALM BEACH IX, INC.

Principal Place of Business
1800 S. AUSTRALIAN AVE.
SUITE 400
WEST PALM BEACH FL 33409

Mailing Address
1800 S. AUSTRALIAN AVE.
SUITE 400
WEST PALM BEACH FL 33409



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/17/1982

4. FEI Number
22-2428059

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30 Country

9. Name and Address of Current Registered Agent

BRANNOCK, G. STEVEN, ESQ.
1800 S. AUSTRALIAN AVENUE
SUITE 400
WEST PALM BEACH FL 33409

10. Name and Address of New Registered Agent

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
HOVNANIAN, KEVORK S.
29 WARD AVENUE
RUMSON NJ

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
HOVNANIAN, ARA K.
61 WHIPPORWILL VALLEY RD
ATLANTIC HIGHLANDS NJ

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
REINHART, PETER S.
2 BAYHILL RD.
LEONARDO NJ

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
MASON, TIMOTHY P.
22 DEVON DRIVE
PISCATAWAY NJ

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
MASON, TIMOTHY P.
22 DEVON DRIVE
PISCATAWAY NJ

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
HOTALING, KARL R
1800 S AUSTRALIAN AVE 400
W PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Karl Reid Hotaling 2/1/98 (561) 478-0060

CR2E034 (10/97)