

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K51948 (3)

1. Corporation Name

HOVNANIAN LEASING CORPORATION

Principal Place of Business

% ROBB R. MAASS ESO
321 ROYAL POINCIANA PLZ
PALM BEACH FL 33480

Mailing Address

% ROBB R. MAASS ESO
321 ROYAL POINCIANA PLZ
PALM BEACH FL 33480



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

12/15/1988

3a. Date of Last Report

03/16/1995

4. FET Number

65-0092625

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MAASS, ROBB R. ESO
321 ROYAL POINCIANA PLZ
PALM BEACH FL 33480

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 the filer please

(NOTE: Registered Agent's signature is not required when registering)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
HOVNANIAN, HIRAIR
STREET ADDRESS
350 S OCEAN BLVD #12B
CITY-ST-ZIP
BOCA RATON FL

TITLE ☐ DELETE

NAME
HOVNANIAN, EDELE
STREET ADDRESS
4000 RT 66
CITY-ST-ZIP
TINTON FALLS NJ

TITLE ☐ DELETE

NAME
HOVNANIAN, ARMEN
STREET ADDRESS
4000 RT 66
CITY-ST-ZIP
TINTON FALLS NJ

TITLE ☐ DELETE

NAME
VOGEL, JOHN R.
STREET ADDRESS
4000 RT 66
CITY-ST-ZIP
TINTON FALLS NJ

TITLE ☐ DELETE

NAME
HOVNANIAN, ANNA
STREET ADDRESS
350 S. OCEAN BLVD. #12B
CITY-ST-ZIP
BOCA RATON FL

TITLE ☐ DELETE

NAME
GILLIES, VIOLET
STREET ADDRESS
4000 RT 66
CITY-ST-ZIP
TINTON FALLS 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

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

14. 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 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:

JOHN R. VOGEL VP

3/13/96

(908) 922-6100

(Type)

Digitally Signed by

CR2E034 (12/95)