

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

08 JAN 28 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L03000038757			
1. Entity Name K. HOVNANIAN WINDWARD HOMES, LLC			
Principal Place of Business 5439 BEAUMONT CENTER BOULEVARD SUITE 1050 TAMPA, FL 33634 US		Mailing Address 5439 BEAUMONT CENTER BOULEVARD SUITE 1050 TAMPA, FL 33634 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
01282008		Chg-LLC CR2E083 (12/06)	
4. FEI Number 20-0301995		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE STE 4 WESTON, FL 33331		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOVNANIAN DEVELOPMENTS OF FLORIDA, INC. 10 HIGHWAY 35 P.O. BOX 500 RED BANK, NJ 07701 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Hovnanian Developments of Florida, Inc. 110 West Front Street Red Bank, NJ 07701 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHULMEYER, GEORGE S 5439 BEAUMONT CENTER BLVD., STE. 1050 TAMPA, FL 33634 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700117610497 02/08/08--01023--014 **138.75 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CORACE, PAUL 5439 BEAUMONT CENTER BLVD., STE. 1050 TAMPA, FL 33634 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KEATING, GARY P 5439 BEAUMONT CENTER BLVD., STE. 1050 TAMPA, FL 33634 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Division Controller Aline Maurer 5439 Beaumont Center Blvd., Suite 1050 Tampa, FL 33634 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the recorder or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <u>Peter S Reinhardt, Secretary of Member: Hovnanian Developments of Florida, Inc.</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 1/28/08 (332) 778-2200			