

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90072 033 ****50.00

DOCUMENT # L05000018686

1. Entity Name
K. HOVNANIAN T & C HOMES AT FLORIDA, L.L.C.



Principal Place of Business
**110 W FIRST ST
RED BANK, NJ 07701**

Mailing Address
**110 W FIRST ST
RED BANK, NJ 07701**

60044792

2. Principal Place of Business - No P.O. Box #
110 West Front Street
Suite, Apt. #, etc.

3. Mailing Address
110 West Front Street
Suite, Apt. #, etc.

04232007 Chg-LLC CR2E083 (12/06)

City & State
Red Bank, NJ

City & State
Red Bank, NJ

4. FEI Number
20-2387167

Applied For
Not Applicable

Zip
07701 Country
USA

Zip
07701 Country
USA

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331**

7. Name and Address of New Registered Agent

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

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
HOVNANIAN DEVELOPMENT OF FLORIDA, INC.
10 HIGHWAY 35
RED BANK, NJ 07701**

☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
Hovnanian Developments of Florida, Inc.
110 West Front Street
Red Bank, NJ 07701**

☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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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 receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE: Marcia Wines Marcia Wines
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/23/07
Date

Daytime Phone #