SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # L19962 (4)K. M. HOMES, INC. Mailing Address Principal Place of Business 880 JUPITER PARK DR 880 JUPITER PARK DR JUPITER FL 33458 JUPITER FL 33458 US 3a. Date of Last Report 3. Date Incorporated or Qualified US 10/02/1989 06/14/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0156356 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 27 \$5.00 May Be City & State City & State Election Campaign Financing Added to Fees Trust Fund Contribution 23 Country 8. This corporation has Fability for intangible tax under s. 199 03? Country Ζıρ ∐ Yes ∏ No 30 Florida Statutes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MALTZ, KEN Street Address (P.O. Box Number is Not Acceptable) 880 JUPITER PARK DR. SUITE 5 83 JUPITER FL 33458 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-hamed 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 (NOTE: Registered Agent's grature required when remaining): Signature, type distribution of the potential agent and title if applicable (3/96)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change Addition DELETE 11 11[15 TITLE CR2E034 MALTZ, KENNETH 1.2 NAME NAME 15131 80TH DR. N. 1.3 STREET ADDRESS STREET ADDRESS PALM BCH GARDENS FL 14 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 21 TITUE TITLE 2.2 NAME MALTZ, SUSAN NAME 15131 80TH DR. N. 2.3 STREET ADDRESS STREET ADDRESS PALM BCH GARDENS FL 2 4 CITY - ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-2IP Change Addition DELETE 5 1 THILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 61.000 TILLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CHTY - 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)(x). Florida Statutes I further certify that the information and effect on this angular report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each, that I am an official or director of true appropriation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and altachment with an address

SIGNATURE: ..

that my name appears in Block 1

Cify-ST-ZiP

6/28/96 961-745-2903