

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 3:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M07375 (2)

1. Corporation Name

K. HOVNANIAN AT JENSEN BEACH, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 11/05/1984	3a. Date of Last Report 04/22/1994
4. FEI Number 22-2572443	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	

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

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

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**BRANNOCK, G. STEVEN, ESQUIRE
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
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 firm if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	HOVNANIAN, KEVORK S.	1.2 NAME	
STREET ADDRESS	29 WARD AVE.	1.3 STREET ADDRESS	
CITY - ST - ZIP	RUMSON NJ	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	HOVNANIAN, ARA K.	2.2 NAME	
STREET ADDRESS	61 WHIPPORWILL VALLEY RD	2.3 STREET ADDRESS	
CITY - ST - ZIP	ATLANTIC HGLNDS NJ	2.4 CITY - ST - ZIP	
TITLE	P	3.1 TITLE	☐ Change ☐ Addition
NAME	ASFANL, PAUL W.	3.2 NAME	
STREET ADDRESS	1800 S. AUSTRALIAN AVE.	3.3 STREET ADDRESS	
CITY - ST - ZIP	WEST PALM BEACH FL	3.4 CITY - ST - ZIP	
TITLE	SD	4.1 TITLE	☐ Change ☐ Addition
NAME	MASON, TIMOTHY P.	4.2 NAME	
STREET ADDRESS	22 DEVON DR.	4.3 STREET ADDRESS	
CITY - ST - ZIP	PISCATAWAY NJ	4.4 CITY - ST - ZIP	
TITLE	T	5.1 TITLE	☐ Change ☐ Addition
NAME	MASON, TIMOTHY P.	5.2 NAME	
STREET ADDRESS	22 DEVON DR.	5.3 STREET ADDRESS	
CITY - ST - ZIP	PISCATAWAY NJ	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	BUCHANAN, PAUL W.	6.2 NAME	
STREET ADDRESS	8 BLUEBERRY LN	6.3 STREET ADDRESS	
CITY - ST - ZIP	LEONARDO NJ	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:

Paul W. Asfanl
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAUL W. ASFANL

3-31-95 407/476-0060

Date

Signature Number 8