

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000020476 (6)

1. Corporation Name

K. HOVNANIAN AT LAKES OF BOCA RATON, INC.

Principal Place of Business

**1800 S AUSTRALIAN AVE
SUITE 400
WEST PALM BEACH FL 33409**

Mailing Address

**1800 S AUSTRALIAN AVE
SUITE 400
WEST PALM BEACH FL 33409**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/19/1993

3a. Date of Last Report

04/22/1994

4. FEI Number

22-3230729

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

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

**BRANNOCK, G S
1800 S AUSTRALIAN AVE
SUITE 400
WEST PALM BEACH FL 33409**

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 title if applicable

NOTE: Registered Agent signature required when terminating

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	HOVNANIAN, KEVORK S	362 VIA LINDA	PALM BEACH FL
D	HOVNANIAN, ARA K	61 WHIPPORWILL VALLEY RD	ATLANTIC HIGHLANDS NJ
D	MASON, TIMOTHY P	22 DEVON DR	PISCATAWAY NJ
D	BUCHANAN, PAUL W	8 BLUEBERRY LANE	LEONARDO NJ
D	REINHART, PETER S	2 BAYHILL RD	LEONARDO NJ
D	SCHIMPF, JOHN J	227 PELICAN RD	MIDDLETOWN NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
P	Asfahl, Paul W.	1800 S. Australian Ave #400	West Palm Beach, FL 33409	☐	☒
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	☐	☐
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	☐	☐
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	☐	☐
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	☐	☐
61 TITLE	62 NAME	63 STREET ADDRESS	64 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. Asfahl
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-95

407/438-0000