

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **V44948** (0)

1. Corporation Name

**K. HOVNANIAN AT FAIRWAY VIEWS, INC.**

Principal Place of Business

**1800 SOUTH AUSTRALIAN AVENUE  
SUITE 400  
WEST PALM BEACH FL 33409**

Mailing Address

**1800 SOUTH AUSTRALIAN AVENUE  
SUITE 400  
WEST PALM BEACH FL 33409**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**BRANNOCK, G. STEVEN  
1800 SOUTH AUSTRALIAN AVENUE  
SUITE 400  
WEST PALM BEACH FL 33409**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

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 is required when filing this report.)

DATE:

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	HOVANIAN, KEVORK S.	
STREET ADDRESS	326 VIA LINDA	
CITY-STATE-ZIP	PALM BEACH FL	
TITLE	D	DELETE
NAME	HOVANIAN, ARA K.	
STREET ADDRESS	61 WHIPPORWILL VALLEY RD	
CITY-STATE-ZIP	ATLANTIC HIGHLND NJ	
TITLE	D	DELETE
NAME	MASON, TIMOTHY P	
STREET ADDRESS	22 DEVON DR.	
CITY-STATE-ZIP	PISCATAWAY NJ	
TITLE	D	DELETE
NAME	BUCHANAN, PAUL W	
STREET ADDRESS	8 BLUEBERRY LANE	
CITY-STATE-ZIP	LEONARDO NJ	
TITLE	D	DELETE
NAME	REINHART, PETERS S	
STREET ADDRESS	2 BAYHILL ROAD	
CITY-STATE-ZIP	LEONARDO NJ	
TITLE	P	DELETE
NAME	ASFAHL, PAUL W	
STREET ADDRESS	1800 S. AUSTRALIAN AVE, #400	
CITY-STATE-ZIP	WEST PALM BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Vice President	Change	Addition
1.2 NAME	G. Steven Brannock		
1.3 STREET ADDRESS	1800 S. Australian Avenue, Suite 400		
1.4 CITY-STATE-ZIP	West Palm Beach, FL 33409	Change	Addition
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-STATE-ZIP		Change	Addition
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-STATE-ZIP		Change	Addition
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-STATE-ZIP		Change	Addition
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-STATE-ZIP		Change	Addition
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-STATE-ZIP		Change	Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G. Steven Brannock 3/12/96 407-478-0060

Daytime Phone #

CR2E034 (12/95)