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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
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 33409-8444

3. Date Incorporated or Qualified
06/19/1992

3a. Date of Last Report
03/25/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

22-3188598

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

9. Name and Address of Current Registered Agent

BRANNOCK, G. STEVEN
1800 SOUTH 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

FL

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

Sign above, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	Change	Addition
1.2 NAME	Karl Reid Hotaling		
1.3 STREET ADDRESS	1800 S. Australian Ave #400		
1.4 CITY - ST - ZIP	West Palm Beach, FL 33409		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Karl Reid Hotaling 4/14/97 (561) 478-0060

Date

Daytime Phone

CP2E034 (9/96)