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Apr 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000064004 (9)

1. Corporation Name
KANE COMMUNITIES, INC.



Principal Place of Business
16221 US HIGHWAY 441
UNIT #108
DELRAY BEACH FL 33446

Mailing Address
16221 US HIGHWAY 441
UNIT #108
DELRAY BEACH FL 33446

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/22/1997

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 9070 KIMBERLY BLVD		26 9070 KIMBERLY BLVD		65-0771589		Not Applicable	
22 Suite, Apt. #, etc. 49		27 Suite, Apt. #, etc. 49		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State BOCA RATON FL		28 City & State BOCA RATON FL		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip 33434		25 Country PALM BEACH		29 Zip 33434		30 Country PALM BEACH	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

DIAMOND, LAWRENCE J
222 LAKEVIEW AVENUE
SUITE 1330
WEST PALM BEACH FL 33401

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PRESIDENT, SECRETARY & TREASURER	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	LEIF E. METSCH	1.2 NAME					
STREET ADDRESS	9432 PEA BODY COURT	1.3 STREET ADDRESS					
CITY-ST-ZIP	BOCA RATON, FL 33496	1.4 CITY-ST-ZIP					
TITLE	VICE PRESIDENT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	DONALD A. SANDS	2.2 NAME					
STREET ADDRESS	18743 LONG LAKE DRIVE	2.3 STREET ADDRESS					
CITY-ST-ZIP	BOCA RATON, FL 33496	2.4 CITY-ST-ZIP					
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4 CITY-ST-ZIP					
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		4.2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY-ST-ZIP		6.4 CITY-ST-ZIP					

14. I 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 person or persons 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.

CR2E034 (10/97)