

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000011481

FILED
Aug 30, 2005
Secretary of State

Entity Name: KANE COMMUNITIES OF AUDUBON, INC.

Current Principal Place of Business:

15 8TH STREET
B
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

620 CARICA ROAD
NAPLES, FL 34108 US

Current Mailing Address:

15 8TH STREET
B
BONITA SPRINGS, FL 34134 US

New Mailing Address:

620 CARICA ROAD
NAPLES, FL 34108 US

FEI Number: 65-0816285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METSCH, LEIF E
15 EIGHTH STREET
SUITE B
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

METSCH, LEIF E
620 CARICA ROAD
NAPLES, FL 34108 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

08/30/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: METSCH, LEIF E
Address: 15 EIGHTH STREET, SUITE B
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP () Delete
Name: SANDS, DONALD A
Address: THE HIGHLANDS
City-St-Zip: SEATTLE, WA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: METSCH, LEIF E
Address: 620 CARICA ROAD
City-St-Zip: NAPLES, FL 34108

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEIF E METSCH

PST

08/30/2005

Electronic Signature of Signing Officer or Director

Date