2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 738019

Entity Name: SAXONY I ASSOCIATION, INC.

FILED May 04, 2022 **Secretary of State** 4896246518CC

Current Principal Place of Business:

SEACREST SERVICES INC

2101 CENTREPARK WEST DRIVE SUITE 110

WEST PALM BEACH, FL 33409

Current Mailing Address:

SEACREST SERVICES INC 2101 CENTREPARK WEST DRIVE SUITE 110 WEST PALM BEACH, FL 33409 US

FEI Number: 59-1759730 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAYE BENDER REMBAUM 1200 PARK CENTRAL BLVD S POMPANO BEACH, FL 33064 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: MICHAEL BENDER 05/04/2022

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **SECRETARY** Title **PRESIDENT**

KULAK, LARISSA TOMSKY, SYLVIA Name Name

SEACREST SERVICES INC SEACREST SERVICES INC Address Address

2101 CENTREPARK WEST DRIVE 2101 CENTREPARK WEST DRIVE SUITE 110 SUITE 110

City-State-Zip: WEST PALM BEACH FL 33409 City-State-Zip: WEST PALM BEACH FL 33409

Title **DIRECTOR** Title **TREASURER**

Name ADLER, DEANNE Name SCHNEEGURT, ELAINE

Address SEACREST SERVICES INC Address SEACREST SERVICES INC

2101 CENTREPARK WEST DRIVE 2101 CENTREPARK WEST DRIVE **SUITE 110**

SUITE 110

WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 City-State-Zip: City-State-Zip:

Title **DIRECTOR** Title VΡ

Name KATZMAN, HOWARD Name DUKE, MARGARET

Address SEACREST SERVICES INC Address SEACREST SERVICES INC

2101 CENTREPARK WEST DRIVE 110 2101 CENTREPARK WEST DRIVE 110

WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 City-State-Zip: City-State-Zip:

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

05/04/2022 SIGNATURE: SYLVIA TOMSKY **PRESIDENT**