# 2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 739244

Entity Name: SAXONY CONDOMINIUM ASSOCIATION, INC.

# Current Principal Place of Business:

JMD PROPERTIES INC 904 SE 5TH AVE. DELRAY BEACH, FL 33483

# **Current Mailing Address:**

JMD PROPERTIES INC 904 SE 5TH AVE. DELRAY BEACH, FL 33483 US

### FEI Number: 59-1756728

### Name and Address of Current Registered Agent:

KONYK & LEMME PLLC 777 S FLAGLER DRIVE STE 800 - WEST TOWER WEST PALM BEACH, FL 33401 US Certificate of Status Desired: No

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.

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SIGNATURE:	CHELLE KONYK, ESQ.			08/22/2017
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title S	SD	Title	PD	
Name \	WAGNER, BARBARA	Name	CRISCUOLO, CHRIS	
Address	143 SAXONY C	Address	456 SAXONY J	
City-State-Zip:	DELRAY BEACH FL 33446	City-State-Zip:	DELRAY BEACH FL 33446	
Title	1STVPD	Title	TD	
Name S	SENOFF, BARRY	Name	MEREMS, SANDRA	
Address 2	294 SAXONY G	Address	452 SAXONY J	
City-State-Zip:	DELRAY BEACH FL 33446	City-State-Zip:	DELRAY BEACH FL 33446	
Title 2	2NDVPD	Title	ASST. SECRETARY/TREASUR	ER
Name F	FOX, MAUREEN	Name	CERUTTI, EUCLIDES	
Address 2	204 SAXONY E	Address	626 SAXONY N	
City-State-Zip:	DELRAY BEACH FL 33446	City-State-Zip:	DELRAY BEACH FL 33446	

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.

SIGNATURE: CHRIS CRISCUOLO

PRESIDENT

08/22/2017 Date

Electronic Signature of Signing Officer/Director Detail