

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739244

**FILED**  
**Jan 16, 2018**  
**Secretary of State**  
**CC1452679292**

**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

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KONYK & LEMME PLLC  
777 S FLAGLER DRIVE  
STE 800 - WEST TOWER  
WEST PALM BEACH, FL 33401 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:** CHELLE KONYK, ESQ.

01/16/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SD  
Name WAGNER, BARBARA  
Address 143 SAXONY C  
City-State-Zip: DELRAY BEACH FL 33446

Title PD  
Name SENOFF, BARRY  
Address 294 SAXONY G  
City-State-Zip: DELRAY BEACH FL 33446

Title 1STVPD  
Name FOX, MAUREEN  
Address 204 SAXONY E  
City-State-Zip: DELRAY BEACH FL 33446

Title TD  
Name MEREMS, SANDRA  
Address 452 SAXONY J  
City-State-Zip: DELRAY BEACH FL 33446

Title 2NDVPD  
Name CERUTTI, EUCLIDES  
Address 626 SAXONY N  
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:** BARRY SENOFF

**BOARD PRESIDENT**

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date