

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008875

**FILED**  
**Jan 05, 2017**  
**Secretary of State**  
**CC8682214018**

**Entity Name:** SAXONY O CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O WILSON LANDSCAPING AND MANAGEMENT CORP  
1300 NW 17TH AVE SUITE 270  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

C/O WILSON LANDSCAPING AND MANAGEMENT CORP  
1300 NW 17TH AVE SUITE 270  
DELRAY BEACH, FL 33445 US

**FEI Number: 01-0567118**

**Certificate of Status Desired: No**

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

WILSON, DANNY L  
C/O WILSON LANDSCAPING AND MANAGEMENT CORP  
1300 NW 17TH AVE SUITE 270  
DELRAY BEACH, FL 33445 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           BERNZWEIG, MURIEL  
Address        C/O WILSON LANDSCAPING AND  
                  MANAGEMENT CORP  
                  1300 NW 17TH AVE SUITE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title           TREASURER, SECRETARY  
Name           LABARBERA, ESTHER  
Address        C/O WILSON LANDSCAPING AND  
                  MANAGEMENT CORP  
                  1300 NW 17TH AVE SUITE 270  
City-State-Zip: DELRAY BEACH FL 33445

Title           PRESIDENT  
Name           BROWNE, LAURA  
Address        C/O WILSON LANDSCAPING AND  
                  MANAGEMENT CORP  
                  1300 NW 17TH AVE SUITE 270  
City-State-Zip: DELRAY BEACH FL 33445

*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: LAURA BROWNE**

**PRESIDENT**

**01/05/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date