2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008875

Entity Name: SAXONY O CONDOMINIUM ASSOCIATION, INC.

FILED Feb 07, 2018 Secretary of State CC5235239837

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:

City-State-Zip:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title TREASURER, SECRETARY

Name BERNZWEIG, MURIEL Name LABARBERA, ESTHER

Address C/O WILSON LANDSCAPING AND Address C/O WILSON LANDSCAPING AND

MANAGEMENT CORP MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270 1300 NW 17TH AVE SI

1300 NW 17TH AVE SUITE 270 1300 NW 17TH AVE SUITE 270
DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Title PRESIDENT Title DIRECTOR

Name BROWNE, LAURA Name BORNSTEIN, SONDRA

Address C/O WILSON LANDSCAPING AND Address C/O WILSON LANDSCAPING AND

MANAGEMENT CORP MANAGEMENT CORP

1300 NW 17TH AVE SUITE 270 1300 NW 17TH AVE SUITE 270

City-State-Zip: DELRAY BEACH FL 33445 City-State-Zip: DELRAY BEACH FL 33445

Date

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.