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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

682490

(8)

DOCUMENT #

1. Corporation Name SAXON-S.L. GENERAL CORPORATION

|--|--|

P. O. BOX 5403 FT. LAUDERDALE FL 33310-5403 US P. O. BOX 5403 FT. LAUDERDALE FL 33310-5403 US 3. Date incorporated or Qualify 06/18/1980 2. Principal Place of Business 2a. Mailing Address 4. FE! Number 59-2037673 21 26 Suite, Apt. #, etc. 5. Contribute of Status Desirer 22 27 City & State 6. Election Campaign Finance Trust Fund Contribution 23 Zip Country Zip Country 8. This corporation has fiability Florida Statutes	O5/01/1995 Applied For Not Applicable S8.75 Additional Fee Required \$5.00 May Be Added to Fees
US 3. Date Incorporated or Qualif	O5/01/1995 Applied For Not Applicable S8.75 Additional Fee Required \$5.00 May Be Added to Fees
2. Principal Place of Business 26 59-2037673 59-2037673	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State City & State Zip Country Country Country Suite, Apt. #, etc. City & State City & Country City & Co	Fee Required \$5.00 May Be Added to Fees
City & State Country Cou	Added to Fees
Zip Country Zip Country 8. This corporation has liability	
	Yes No
9, Name and Address of Current Registered Agent 10. Name and Address of N	ew Registered Agent
81 Name	•
LEVAN, ALAN B. 1750 E. SUNRISE BLVD. 82 Street Address (P.O. Box Number is Not Account to the Company of the	eptable)
3RD FLOOR	
FT. LAUDERDALE FL 33304 84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	ne purpose of changing its registered office e appointment as registered agent. I am
SIGNATURE	
Signature, Speed or printer name of regordered agree are the Chapit of the Courter than a force appear and the printer	DATE O OFFICERS AND DIRECTORS IN 12
12. Chief A A Direction Constitution of the Co	Change Addition
I EVAN ALAN D	
NAME STREET ADDRESS 1750 E. SUNRISE BLVD., 3RD FLOOR 13 STREET ADDRESS	
CITY-ST-2IP FT. LAUDERDALE FL 1.4 CITY-ST-2IF	
TITLE VIS DELETE 2 1 1 1 1 E	Change Addition
NAME GILBERT, GLEN R. 22 NAME	
STREET ADDRESS 1750 E. SUNRISE BLVD., 3RD FLOOR 23 STREET ADDRESS	
CITY-SI-ZIP FT. LAUDERDALE FL 24 CITY-SI-ZIP	Change Addition
TITLE DELETE 3 1 THE	Change Addition
NAME 32 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
City-S1-72P 34 City-S1-72P 101/F	Change Addition
	_ • _
AO PROVINCE	
ALCON CLUB C	
TITLE	Change Addition
NAME 52 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5 4 CITY-ST-ZIF	
TITLE DELETE 6 1 TITLE	Change Addition
NAME 6.2 NAME	
STREET ADDRESS 63 STHEET ACCIDESS	
CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.5 CITY-ST-ZIP 6.	

I do hereby certify that the information supplied with this filing is voluntianly furnished and does not qualify for the exemption stated in Section 119.07(3)(6), Piona Statutes. Turner certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if niade 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

**Color of the Corporation of the Corporation

SIGNATURE: ___

GLEN R. GILBERT

Senior Vice President

Signature and type on Printed Name of Signing Officer on Director

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CR2E034 (12/95)