

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708163

FILED
Jan 25, 2007
Secretary of State

Entity Name: ROYAL SAXON, INC.

Current Principal Place of Business:

2840 SOUTH OCEAN BLVD
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

2840 SOUTH OCEAN BLVD
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-1118291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORE, DAVID A ESQ.
1600 FORUM PLACE
CENTURION TOWER, SUITE 701
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANTHONY, TIMOTHY
Address: 2840 S OCEAN BLVD 414
City-St-Zip: PALM BEACH, FL 33480

Title: DVP () Delete
Name: AMICO, LINDA
Address: 2840 S OCEAN BLVD., #110
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: JACOBY, DIANE
Address: 2840 S OCEAN BLVD 212
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: GROSSMAN, BARBARA
Address: 2840 S OCEAN BLVD 506
City-St-Zip: PALM BEACH, FL 33480

Title: D (X) Delete
Name: MEMOLY, GEORGE
Address: 2840 S OCEAN BLVD 426
City-St-Zip: PALM BEACH, FL 33480

Title: D (X) Delete
Name: NAPLPERN, ARTHUR
Address: 2840 S OCEAN BLVD 326
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MEMOLY, GEORGE
Address: 2840 S OCEAN BLVD 426
City-St-Zip: PALM BEACH, FL 33480

Title: DVP (X) Change () Addition
Name: GROSSMAN, BARBARA B
Address: 2840 S OCEAN BLVD., #506
City-St-Zip: PALM BEACH, FL 33480

Title: DT (X) Change () Addition
Name: PLATZNER, COREY
Address: 2840 S OCEAN BLVD 606
City-St-Zip: PALM BEACH, FL 33480

Title: DS (X) Change () Addition
Name: SHIPEK, ED
Address: 2840 S OCEAN BLVD 221
City-St-Zip: PALM BEACH, FL 33480

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEORGE MEMOLY

DP

01/25/2007

Electronic Signature of Signing Officer or Director

Date