

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708163

FILED  
Mar 11, 2009  
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: P ( ) Delete  
Name: KOSEFF, ALAN  
Address: 2840 S. OCEAN BLVD 118  
City-St-Zip: PALM BEACH, FL 33480

Title: VP ( ) Delete  
Name: SHIPEK, ED  
Address: 2840 S. OCEAN BLVD 221  
City-St-Zip: PALM BEACH, FL 33480

Title: T ( ) Delete  
Name: SCHULZ, WOLFGANG  
Address: 2840 S. OCEAN BLVD 119  
City-St-Zip: PALM BEACH, FL 33480

Title: S ( ) Delete  
Name: GOLDMAN, JUNE  
Address: 2840 S. OCEAN BLVD 108  
City-St-Zip: PALM BEACH, FL 33480

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: LORENZO, FRANK  
Address: 2840 S. OCEAN BLVD 514  
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 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: EDWARD SHIPEK

P

03/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date