2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000034023

Entity Name: SAXON, LLC

FILED Feb 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

201 FRONT STREET BLDG 21 STE 109 412 WHITE STREET KEY WEST, FL 33040 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

PO BOX 5552 412 WHITE STREET KEY WEST, FL 33040 KEY WEST, FL 33040

FEI Number: 20-0217806 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SAUNDERS, SCOTT A 412 WHITE STREET KEY WEST, FL 33040 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

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DOELMAN, JAN
 Name:

 Address:
 615 AMELIA STREET
 Address:

 City-St-Zip:
 KEY WEST, FL 330400
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SAUNDERS, SCOTT
 Name:

 Address:
 FOUR COCONUT DRIVE
 Address:

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 STEVENSON, GLENN
 Name:
 STEVENSON, GLENN

 Address:
 615 AMELIA STREET
 Address:
 616 VIRGINIA STREET

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33040

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SCOTT SAUNDERS MGRM 02/08/2009