

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003067

FILED
Mar 06, 2007
Secretary of State

Entity Name: SAXONY CAPITAL MANAGEMENT LLC

Current Principal Place of Business:

86 KENRICK PLAZA
SAINT LOUIS, MO 63119

New Principal Place of Business:

Current Mailing Address:

86 KENRICK PLAZA
SAINT LOUIS, MO 63119

New Mailing Address:

FEI Number: 47-0889870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCAFIDI, RICHARD
5182 MABRY AVE
NAPLES, FL 34112 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GRIFFARD, RICHARD E
Address: 86 KENRICK PLAZA
City-St-Zip: SAINT LOUIS, MO 63119

Title: MGR () Delete
Name: DAIRAGHI, CHARLES A
Address: 86 KENRICK PLAZA
City-St-Zip: ST. LOUIS, MO 63119

Title: MGR () Delete
Name: SCAFIDI, RICHARD S
Address: 5182 MABRY DR
City-St-Zip: NAPLES, FL 34112

Title: MGR () Delete
Name: ELDER, SCOTT
Address: 86 KENRICK PLAZA
City-St-Zip: SAINT LOUIS, MO 63119

Title: MGR () Delete
Name: SCHEIDT, JAMES H
Address: 86 KENRICK PLAZA
City-St-Zip: ST LOUIS, MO 63119

Title: MGR () Delete
Name: CLARK, BRIAN L
Address: 86 KENRICK PLAZA
City-St-Zip: ST LOUIS, MO 63119

ADDITIONS/CHANGES:

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

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

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

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

Title: () Change () Addition
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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 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: CHARLES A DAIRAGHI

MGR

03/06/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date