2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2010
Secretary of State

DOCUMENT# N07000011799

Entity Name: SAXONY M ASSOCIATION, INC.

Current Principal Place of Business:

C/O WILSON MANAGEMENT
15300 JOG RD, SUITE 109
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

C/O WILSON MANAGEMENT
15300 JOG RD, SUITE 109
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 26-1634648 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, DANNY L
15300 JOG RD, SUITE 109
C/O WILSON MANAGEMENT
DELRAY BEACH, FL 33436 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
Name: MILLER, DANIEL
Address: 601 SAXONY M
City-St-Zip: DELRAY BEACH, FL 33446

Title: VP
Name: HELMSLEY, NELSON
Address: 597 SAXONY M
City-St-Zip: DELRAY BEACH, FL 33446

Title: S
Name: POMERANTZ, GLORIA
Address: 611 SAXONY M
City-St-Zip: DELRAY BEACH, FL 33446

Title: T
Name: HORENSTEIN, EDWARD
Address: 594 SAXONY M
City-St-Zip: DELRAY BEACH, FL 33446

Title: D
Name: FABIAN, SHELBY
Address: 609 SAXONY M
City-St-Zip: DELRAY BEACH, FL 33446

Title: D
Name: OBERST, MARK
Address: 608 SAXONY M
City-St-Zip: DELRAY BEACH, FL 33446

I hereby 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 all other like empowered.

SIGNATURE: DANIEL MILLER P 01/28/2010
Electronic Signature of Signing Officer or Director Date