

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 21, 2011
Secretary of State

Entity Name: SAXONY M ASSOCIATION, INC.

Current Principal Place of Business:

4723 W. ATLANTIC AVENUE
SUITE A-19
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

4723 W. ATLANTIC AVENUE
SUITE A-19
DELRAY BEACH, FL 33445

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
4723 W. ATLANTIC AVENUE
SUITE A-19
DELRAY BEACH, FL 33445 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: HEMSLEY, 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

01/21/2011

Electronic Signature of Signing Officer or Director

Date