

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002008

FILED
Apr 17, 2007
Secretary of State

Entity Name: SAXON WOODS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8009 S ORANGE AVE
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

8009 S ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 65-0833201 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MGMT., INC.
8009 S ORANGE AVE
ORLANDO, FL 32809 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: MILLER, ROBERT W
Address: 558 WOODFORD DR
City-St-Zip: DEBARY, FL 32713

Title: VP () Delete
Name: BARRY, FRANCES
Address: 154 BRASSINGTON DR
City-St-Zip: DEBARY, FL 32713

Title: S () Delete
Name: PARKER JR, EDWARD
Address: 512 FERN LAKE TERR
City-St-Zip: DEBARY, FL 32713

Title: T () Delete
Name: BERGEN, PAUL J
Address: 320 BURCHINGTON DR
City-St-Zip: DEBARY, FL 32713

Title: D () Delete
Name: HARSHBARGER, BRYAN P
Address: 512 HILLSHIRE DR
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: BIRCH, TRACY W
Address: 258 BRASSINGTON DR
City-St-Zip: DEBARY, FL 32713

Title: S (X) Change () Addition
Name: WRIGHT, MELANIE
Address: 142 BRASSINGTON DR
City-St-Zip: DEBARY, FL 32713

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

Title: D (X) Change () Addition
Name: LAVOIE, PAUL
Address: 137 BRADWICK CIRCLE
City-St-Zip: DEBARY, FL 32713

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 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: ROBERT W MILLER

P

04/17/2007

Electronic Signature of Signing Officer or Director

Date