

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000044797

Entity Name: SAXON SERVICES, INC.

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7599 WIMPY LANE  
TAMPA, FL 33625

**New Principal Place of Business:**

**Current Mailing Address:**

7599 WIMPY LANE  
TAMPA, FL 33625

**New Mailing Address:**

FEI Number: 20-2568553

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLORIDA INCORPORATORS, INC.  
8875 HIDDEN RIVER PARKWAY  
SUITE 300  
TAMPA, FL 336372087 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: D  
Name: EMERT, PHILIP C  
Address: 7599 WIMPY LANE  
City-St-Zip: TAMPA, FL 33625

Title: D  
Name: EMERT, DONNA R  
Address: 7599 WIMPY LANE  
City-St-Zip: TAMPA, FL 33625

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PHILIP EMERT

PRES

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date