

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000035502

FILED
Mar 24, 2009
Secretary of State

Entity Name: SAXON DEVELOPMENT COMPANY, INC.

Current Principal Place of Business:

450 N.E. 32ND STREET
MIAMI, FL 33137 US

New Principal Place of Business:

47 W. WALL STREET
FROSTPROOF, FL 33843 US

Current Mailing Address:

450 N.E. 32ND STREET
MIAMI, FL 33137 US

New Mailing Address:

47 W. WALL STREET
FROSTPROOF, FL 33843 US

FEI Number: 65-0416852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOHL, ROBERT
450 NE 31 STREET
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

WOHL, ROBERT
47 W. WALL STREET
FROSTPROOF, FL 33843 US

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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WOHL, ROBERT
Address: 450 NE 31 STREET
City-St-Zip: MIAMI, FL 33137 US

Title: DV () Delete
Name: GOLD, CAROLYN
Address: 450 NE 32 STREET
City-St-Zip: MIAMI, FL 33137 US

Title: DST () Delete
Name: WOHL, AGNES
Address: 450 NE 32 STREET
City-St-Zip: MIAMI, FL 33137 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WOHL, ROBERT
Address: 47 W WALL STREET
City-St-Zip: FROSTPROOF, FL 33843 US

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

Title: DST (X) Change () Addition
Name: WOHL, AGNES
Address: 835 NE 72 TERRACE
City-St-Zip: MIAMI, FL 33138 US

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AGNES WOHL

DST

03/24/2009

Electronic Signature of Signing Officer or Director

Date