

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000035502

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SAXON DEVELOPMENT COMPANY, INC.

**Current Principal Place of Business:**

47 W. WALL STREET  
FROSTPROOF, FL 33843 US

**New Principal Place of Business:**

**Current Mailing Address:**

47 W. WALL STREET  
FROSTPROOF, FL 33843 US

**New Mailing Address:**

**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  
47 W. WALL STREET  
FROSTPROOF, FL 33843 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: DP  
Name: WOHL, ROBERT  
Address: 47 W WALL STREET  
City-St-Zip: FROSTPROOF, FL 33843 US

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

Title: DST  
Name: WOHL, AGNES  
Address: 935 NE 72 TERRACE  
City-St-Zip: MIAMI, FL 33138 US

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: ROBERT WOHL

DP

04/30/2012

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

\_\_\_\_\_  
Date