

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90182 015 ****61.25

DOCUMENT # 745868
 1. Entity Name
 BURGUNDY L ASSOCIATION, INC.



Principal Place of Business: PRIME MANAGEMENT GROUP, INC. 6300 PK OF COMMERCE BLVD BOCA RATON, FL 33487 US
 Mailing Address: PRIME MANAGEMENT GROUP, INC. 6300 PK OF COMMERCE BLVD BOCA RATON, FL 33487 US



2. Principal Place of Business - No P.O. Box #
 3. Mailing Address

Suite, Apt. #, etc.

01292007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number: 59-1924636
 Applied For: Not Applicable

Zip: Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERNSTEIN, ARNIE
 6300 PK OF COMMERCE BLVD
 BOCA RATON, FL 33487

7. Name and Address of New Registered Agent

Name: Burgundy L
 Street Address (P.O. Box Number is Not Acceptable): 6300 Park of Commerce Blvd
 City: Boca Raton FL Zip Code: 33487

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [Signature] DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE: D	ZUKERMAN, NORMAN 548 BURGUNDY L DELRAY BEACH, FL 33484
TITLE: D	GRONNER, EDNA 559 BURGUNDY L DELRAY BEACH, FL
TITLE: TD	LEVINE, DOROTHY 540 BURGUNDY L DELRAY BEACH, FL
TITLE: P	LOTT, RHONA 532 BURGUNDY L DELRAY BEACH, FL
TITLE: DVP	WEINER, MARTHA 539 BURGUNDY L DELRAY BEACH, FL
TITLE: D	GROSS, SHIRLEY 549 BURGUNDY L DELRAY BEACH, FL 33484

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: [] Change [] Addition	
TITLE: [] Change [] Addition	
TITLE: [] Change [] Addition	
TITLE: [] Change [] Addition	
TITLE: [] Change [] Addition	
TITLE: <u>5</u> [] Change [] Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE: 3/22/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR