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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 745987

1. Corporation Name

BURGUNDY F 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

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

02/16/1979

4. FEI Number

59-1934122

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

SCHWARTZ, MARIAN  
KINGS POINT, BURGUNDY F253  
DELRAY BEACH FL 33484

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  DELETE  
NAME LEVINE, EUGENE  
STREET ADDRESS KINGS PT. BURGUNDY F 264  
CITY-ST-ZIP DELRAY BEACH FL

TITLE V  DELETE  
NAME GERSTEL, EMERIC  
STREET ADDRESS 244 BURGUNDY F  
CITY-ST-ZIP DELRAY BEACH FL

TITLE S  DELETE  
NAME WERTMAN, RUTH  
STREET ADDRESS KINGS PT. BURGUNDY F 260  
CITY-ST-ZIP DELRAY BEACH FL

TITLE TD  DELETE  
NAME SCHWARTZ, MARIAN  
STREET ADDRESS KINGS PT. BURGUNDY F 253  
CITY-ST-ZIP DELRAY BEACH FL

TITLE D  DELETE  
NAME CUCE, THOMAS  
STREET ADDRESS 262 BURGUNDY F  
CITY-ST-ZIP DELRAY BEACH FL

TITLE D  DELETE  
NAME BERMAN, JACK  
STREET ADDRESS KINGS PT. BURGUNDY F 259  
CITY-ST-ZIP DELRAY BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)