

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744901

Entity Name: BURGUNDY E ASSOCIATION, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487**Current Mailing Address:**FIRSTSERVICE RESIDENTIAL
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US**FEI Number:** 59-1909210**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD,INC.
1655 PALM BEACH LAKES BLVD
C-500
W.PALM BEACH, FL 33401 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:** LAURA M MANNING-HUDSON

03/27/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name WANDER, MARILYN
Address 237 BURGUNDY E
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name BENEVENTO, ANITA
Address 229 BURGUNDY E
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT
Name OSBORNE, MARIAN
Address 196 BURGUNDY E
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name SCHECHTER, HERB
Address 212 BURGUNDY E
City-State-Zip: DELRAY BEACH FL 33484

Title TREASURER
Name MEHLMAN, JIM
Address 197 BURGUNDY E
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY
Name DOWLING, MARYANN
Address 234 BURGUNDY E
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name SCHECHTER, HERB
Address 212 BURGUNDY E
City-State-Zip: DELRAY BEACH FL 33484

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

SIGNATURE: MARIAN OSBORNE

PRES.

03/27/2015

Electronic Signature of Signing Officer/Director Detail

Date