Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745987

Entity Name: BURGUNDY F ASSOCIATION, INC.

Current Principal Place of Business:

C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270 DELRAY BEACH, FL 33445

Current Mailing Address:

C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270 DELRAY BEACH, FL 33445 US

FEI Number: 59-1934122

Name and Address of Current Registered Agent:

SIGNATURE: ERIC GLAZER, PRESIDENT

GLAZER & ASSOCIATES, P.A. 3113 STIRLING RD., #201 FT. LAUDERDALE, FL 33021 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.

		,			
		Electronic Signature of Registered Agent			Date
Officer/Director Detail :					
	Title	PRESIDENT	Title	SECRETARY-TREASURER	
	Name	WOLLINS, ABBE	Name	BERNSTEIN, MARVIN	
	Address	C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	Address	C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	
	City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	DELRAY BEACH FL 33445	
	Title	DIRECTOR	Title	DIRECTOR	
	Name	WESTON, ALLEN	Name	BOTTA, FEDERICO	
	Address	C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	Address	C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	
	City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	DELRAY BEACH FL 33445	
	Title	VICE-PRESIDENT	Title	DIRECTOR	
	Name	MARCUS, CARY	Name	MASTROENI, SALVATORE	
	Address	C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	Address	C/O WILSON LANDSCAPING & MANAGEMENT CORP 1300 NW 17TH AVE SUITE 270	
	City-State-Zip:	DELRAY BEACH FL 33445	City-State-Zip:	DELRAY BEACH FL 33445	

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: MARVIN BERNSTEIN

SECRETARY

01/19/2024 Date

FILED Jan 19, 2024 Secretary of State 7800027053CC

Certificate of Status Desired: No

01/19/2024