2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745344

Entity Name: BURGUNDY N ASSOCIATION, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6300 PRK (NAGEMENT GF DF COMMERCI ON, FL 33487						
Current Mailing Address:				New Mailing Address:			
6300 PRK (NAGEMENT GF DF COMMERCI ON, FL 33487						
FEI Number:	59-1915651	FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
BURGUNDY N 6300 PK OF COMMERCE BLVD BOCA RATON, FL 33487 US				HILLEY & WYANT - CORTEZ, P.A 860 U.S. HIGHWAY 1 SUITE 108 N. PALM BEACH, FL 33408 US			
The above in the State		bmits this statement for the pu	irpose of	f changing it	ts registered of	fice or registered agent, or bo	th,
SIGNATURE: PATRICIA HARTLEY				04/29/2009			
	Electronic	Signature of Registered Ager	nt			Date	
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES	TO OFFICERS AND DIRECT	ORS:
Title: Name: Address: City-St-Zip:	D () D LASHINSKY, ETH 628 BURGUNDY I DELRAY BEACH,	EL N		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	V () D GOLD, MARION 670 BURGUNDY DELRAY BEACH,			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	SD () D GREENWALD, BE 646 BURGUNDY D DELRAY BEACH,	ERNICE N		Title: Name: Address: City-St-Zip:	SEC (X) HEITE, JOAN 647 BURGUNDY DELRAY BEACH		
Title: Name: Address: City-St-Zip:	P () D HEITE, STANLEY 647 BURGUNDY I DELRAY BEACH,	N		Title: Name: Address: City-St-Zip:	P (X) GREENWALD, E 646 BURGUNDY DELRAY BEACH	'N	
Title: Name: Address: City-St-Zip:	T () D LOWELL, ROZ 635 BURGUNDY I DELRAY BEACH,			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	() D	elete		Title: Name: Address: City-St-Zip:	DIR () KRINSKY, SHEI 645 BURGUNDY DELRAY BEACH	'N	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BERNICE GREENWALD PRES 04/29/2009