2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745344

1. Entity Name

BURGUNDY N ASSOCIATION, INC.



FILED
May 16, 2003 8:00 am \$
Secretary of State

05-16-2003 90179 006 ****61.25

Principal Plac	e of Business	Mailing Address		"				
PRIME MANAGEMENT GROUP, INC. 6300 PRK OF COMMERCE BLVD BOCA RATON FL 33487 US		PRIME MANAGEMENT GROUP. INC. 6300 PRK OF COMMERCE BLVD BOCA RATON FL 33487 US) 1 51 111 1 61 11 161 11 161 11 161 11	BL 81108 11111 BYBY BYBY BYBY BYBY B)) (180) (180) (1 80)	A)) 6)U() (85)	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 59	4. FEI Number 59-1915651		oplied For of Applicable	-
Zip Country		Zip	Country	5. Certificate of Sta			\$8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent	<u> </u>	7. Name and Addr	ess of New Registered			┨
·	or reality and Adalogs of Carrett	logioto/au rigott	Name	THAIR WITE PROGRE	DOG OF MAN THOUSANDER	-tgont		1
SWATT,	MYRON			TOTAL AND THE WORLD STATE OF THE STATE OF TH			=======================================	┨
6300 PK OF COMMERCE BLVD			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
	ATON FL 33487							1
			City		FL	Zip Cod	e	
8. The above	named entity submits this statement for	registered office or reg	istered agent, or both, in the	ne State of Florida. I am	amiliar with,	and accept	1	
the obligat	ions of registered agent.	-						
	(C.) - (
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable (NOTE	: Registered Agent signature re	voliting when reinstating)	DATE			-
								-
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State			
					ं ते प			
10.	OFFICERS AND DIR	ECTORS	11.		S TO OFFICERS AND DI		10]_
TITLE .	P	☐ Delete		Dîr.		Change	☐ Addition	/10/02
NAME	HIRSH, CLAIRE			mire Hirsch				=
STREET ADDRESS CITY-ST-ZIP	660 BURGUNDY N DELRAY BEACH FL			60 Burgund	n FL 3348	ď		8
TITLE	TD	☐ Delete		CLIERY BANG	h /C 3316	Thange	Addition	12
NAME	LAZONIS, JANET	☐ Delete	1112	nnet-LAZA	m 1 C	Change	Audition	5
STREET ADDRESS	670 BURGUNDY N	•	-	70 Dugua	1 V S			
CITY-ST-ZIP	DELRAY BEACH FL 33484			HENY BUHCH	FI 33484	r		
TITLÉ	SD	☐ Delete		reas.	(Change	Addition	ĺ
NAME	GREENWALD, BERNICE			loz Lowell				
STREET ADDRESS	646 BURGUNDY N			35 Burgundy	N			1
CITY-ST-ZIP	DELRAY BEACH FL 33484		CITY-ST-ZIP	KIRMY BEMUS.	PL 33484]
TITLE	DVP	☐ Delete	TITLE $\widehat{\mathcal{F}}$	> 1		Change	☐ Addition	
NAME	LASHINSKY, ETHEL			the L Lashink	ર પું			
STREET ADDRESS	628 BURGUNDY N		STREET ADDRESS	ak Bursundy	\sim			
CITY-ST-ZIP	DELRAY BEACH FL 33484			LLRAY BEALLY,	1-1- 37484			l
TITLE	D STANIEN	☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS	MELTZER, STANLEY		NAME CORPET ADDRESS				1	
CITY-ST-ZIP	662 BURGUNDY N DELRAY BEACH FL 33484		STREET ADDRESS CITY-ST-ZIP				1	1

12. 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 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.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

LEVINE, LOUIS

627 BURGUNDY N

TITLE

NAME

STREET ADDRESS

The UNISHT WHOUSERES

Delete

3/24/03

496-1586

☐ Change

☐ Addition

(2E037 (10/02)