

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Charles B. Sawchuk
Secretary of State
1000 Bay Plaza, Suite 1000, Jacksonville, FL 32201

FILED
SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATE

95 MAY -1 AM 11:46

DOCUMENT # 745866

(4)

BURGUNDY H ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business PRIME MANAGEMENT GROUP, INC. 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487	1a. Mailing Address PRIME MANAGEMENT GROUP, INC. 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487
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3. Date Incorporated or Qualified 02/07/1979	3a. Date of Last Report 05/01/1994
4. FEI Number 59-1936479	☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under § 190.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21	2a. Mailing Address 26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent BLUSTEIN, HELEN KINGS PT BURGUNDY H384 DELRAY BEACH FL 33484	
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)
83.	84. City
85. Zip Code	FL

10. Name and Address of New Registered Agent	
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)
83.	84. City
85. Zip Code	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11. TITLE	☐ Change ☐ Addition
NAME	BLUSTEIN, HELEN	12. NAME	
STREET ADDRESS	KINGS PT. BURGUNDY H 384	13. STREET ADDRESS	
CITY, ST, ZIP	DELRAY BEACH FL	14. CITY, ST, ZIP	
TITLE	NAME	15. TITLE	☐ Change ☐ Addition
NAME	SCOLL, JOE	16. NAME	
STREET ADDRESS	KINGS PT. BURGUNDY H 382	17. STREET ADDRESS	
CITY, ST, ZIP	DELRAY BEACH FL	18. CITY, ST, ZIP	
TITLE	NAME	19. TITLE	☐ Change ☐ Addition
NAME	JACOBSON, SAUL	20. NAME	
STREET ADDRESS	KINGS PT. BURGUNDY H 259	21. STREET ADDRESS	
CITY, ST, ZIP	DELRAY BEACH FL	22. CITY, ST, ZIP	
TITLE	NAME	23. TITLE	☐ Change ☐ Addition
NAME	COHEN, NANCY	24. NAME	
STREET ADDRESS	KINGS PT. BURGUNDY H 337	25. STREET ADDRESS	
CITY, ST, ZIP	DELRAY BEACH FL	26. CITY, ST, ZIP	
TITLE	NAME	27. TITLE	☐ Change ☐ Addition
NAME	WALLACH, SEYMOUR	28. NAME	
STREET ADDRESS	KINGS PT. BURGUNDY H 349	29. STREET ADDRESS	
CITY, ST, ZIP	DELRAY BEACH FL	30. CITY, ST, ZIP	
TITLE	NAME	31. TITLE	☐ Change ☐ Addition
NAME	SKULNICK, ANNE	32. NAME	
STREET ADDRESS	KINGS PT. BURGUNDY H 374	33. STREET ADDRESS	
CITY, ST, ZIP	DELRAY BEACH FL	34. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 130.07(1)(b), Florida Statutes. I further certify that the information was filed as the annual report or supplemental annual report as 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on any attachment with an address.

SIGNATURE: *Helen Blustein* Helen Blustein 3/8/95 407-498-5643

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR