

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **745867** (2)
1. Corporation Name
BURGUNDY I ASSOCIATION, INC.



Principal Place of Business: **PRIME MANAGEMENT GROUP, INC. 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487**
Mailing Address: **PRIME MANAGEMENT GROUP, INC. 1051 SOUTH ROGERS CIRCLE BOCA RATON FL 33487**

3. Date Incorporated or Qualified: **02/07/1979**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-1920759**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent
**PULK, HARRY
KINGS PT. BURGUNDY I
APARTMENT 388
DELRAY BEACH FL 33484**

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE	1.1 TITLE AGENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME PULK, HARRY		1.2 NAME RAIBLE, RONALD	
STREET ADDRESS KINGS PT. BURGUNDY I 388		1.3 STREET ADDRESS 6300 PARK OF COMMERCE BLVD.	
CITY-ST-ZIP DELRAY BEACH FL		1.4 CITY-ST-ZIP BOCA RATON, FL 33487	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BOWERS, IRVING		2.2 NAME	
STREET ADDRESS KINGS PT. BURGUNDY I 390		2.3 STREET ADDRESS	
CITY-ST-ZIP DELRAY BEACH FL 33484		2.4 CITY-ST-ZIP	
TITLE S	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HAHN, LUCILLE		3.2 NAME	
STREET ADDRESS KINGS PT. BURGUNDY I 410		3.3 STREET ADDRESS 000001808210	
CITY-ST-ZIP DELRAY BEACH FL		3.4 CITY-ST-ZIP -05/06/96--01016--006	
TITLE T	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ROSENBERG, ABE		4.2 NAME	
STREET ADDRESS KINGS PT. BURGUNDY I 391		4.3 STREET ADDRESS	
CITY-ST-ZIP DELRAY BEACH FL		4.4 CITY-ST-ZIP	
TITLE D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME ROSS, AL		5.2 NAME	
STREET ADDRESS KINGS PT. BURGUNDY I 430		5.3 STREET ADDRESS 394 BURGUNDY I	
CITY-ST-ZIP DELRAY BEACH FL		5.4 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ABOLSKY, JACK		6.2 NAME	
STREET ADDRESS KINGS PT. BURGUNDY I 422		6.3 STREET ADDRESS	
CITY-ST-ZIP DELRAY BEACH FL 33484		6.4 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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 (if changed, or on an attachment) as an address.

SIGNATURE: *Harry Pulk* DATE: **3-28-96** DAYTIME PHONE: **9974045**

CR2E037 (12/95)