

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745867

1. Entity Name

BURGUNDY I ASSOCIATION, INC.

Principal Place of Business

PRIME MANAGEMENT GROUP, INC.  
6300 PRK OF COMMERCE BLVD  
BOCA RATON FL 33487  
US

Mailing Address

PRIME MANAGEMENT GROUP, INC.  
6300 PRK OF COMMERCE BLVD  
BOCA RATON FL 33487-8229  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1920759

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PULIK, HARRY  
KINGS PT. BURGUNDY I  
APARTMENT 388  
DELRAY BEACH FL 33484

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required 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  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete  
NAME PULIK, HARRY  
STREET ADDRESS KINGS PT. BURGUNDY I 388  
CITY-ST-ZIP DELRAY BEACH FL

TITLE D ☒ Change ☐ Addition  
NAME Pulik, Harry  
STREET ADDRESS 388 Burgundy I  
CITY-ST-ZIP Delray Beach, FL 33484

TITLE D ☐ Delete  
NAME DINOWITZ, JOSEPH  
STREET ADDRESS 411 BURGUNDY I  
CITY-ST-ZIP DELRAY BEACH FL

TITLE J ☒ Change ☐ Addition  
NAME Dinowitz, Joseph  
STREET ADDRESS 411 Burgundy I  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME HAHN, LUCILLE  
STREET ADDRESS KINGS PT. BURGUNDY I 410  
CITY-ST-ZIP DELRAY BEACH FL

TITLE P. ☒ Change ☐ Addition  
NAME Hahn, Lucille  
STREET ADDRESS 410 Burgundy I  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME ROSENBERG, ABRAHAM  
STREET ADDRESS 391 BURGUNDY I  
CITY-ST-ZIP DELRAY BEACH FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VT ☐ Delete  
NAME ABOLSKY, JACK  
STREET ADDRESS KINGS PT. BURGUNDY I 422  
CITY-ST-ZIP DELRAY BEACH FL 33484

TITLE VP ☒ Change ☐ Addition  
NAME Abolsky, Jack  
STREET ADDRESS 422 Burgundy I  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Change ☒ Addition  
NAME Diamond, Dora  
STREET ADDRESS 424 Burgundy I  
CITY-ST-ZIP

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.

SIGNATURE:

*SIGNATURE REQUIRED*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-9-10

Date

Daytime Phone #

FILED  
Apr 27, 2000 8:00 am  
Secretary of State

04-27-2000 90108 034 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)