

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745344

Entity Name: BURGUNDY N ASSOCIATION, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
6300 PRK OF COMMERCE BLVD
BOCA RATON, FL 33487**Current Mailing Address:**FIRST SERVICE RESIDENTIAL
6300 PRK OF COMMERCE BLVD
BOCA RATON, FL 33487 US**FEI Number:** 59-1915651**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.
1655 PALM BEACH LAKES BLVD
C-500
W. PALM BEACH, FL 33401 US*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:** LAURA M MANNING-HUDSON

03/09/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KRINSKY, SHEILA
Address 645 BURGUNDY N
City-State-Zip: DELRAY BEACH FL 33484

Title S
Name GREENWALD, BERNICE
Address 646 BURGUNDY N
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name GUGICK, BEA
Address 671 BURGUNDY N
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name FELTZIN, SCOTT
Address 672 BURGUNDY N
City-State-Zip: DELRAY BEACH FL 33484

Title VICE PRESIDENT
Name LOWELL, ROSLYN
Address 635 BURGUNDY N
City-State-Zip: DELRAY BEACH FL 33484

Title TREASURER
Name LAWRENCE, HOWARD
Address 628 BURGUNDY N
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name HEITE, JOAN
Address 647 BURGUNDY N
City-State-Zip: DELRAY BEACH FL 33484

I hereby 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 all other like empowered.

SIGNATURE: SHEILA KRINSKY

PRESIDENT

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date