


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90286 041 ****61.25

DOCUMENT # 760475

1. Entity Name
VERSAILLES GARDENS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**8001 COLONY CIRCLE N
 TAMARAC, FL 33321 US**

Mailing Address
**8001 COLONY CIRCLE N
 TAMARAC, FL 33321 US**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

03172006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2778366

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



6. Name and Address of Current Registered Agent

**GANGUZZA, JOE
 HABER & GANGUZZA LLP
 One Southeast 3rd Avenue-Ste.# 1820
 Miami, Florida 33131**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP RIVERA, RAFAEL 4415 NW 84TH TERRACE CORAL SPRINGS, FL 33065 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT SPIEGEL, PEARL 18655 OCEAN DR APT 15F HALLANDALE, FL 33009 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS WEBSTER, STEWART 7900 COLONY CIRCLE S #208 TAMARAC, FL 33321 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DO GREEN, JOHN 7925 FAIRVIEW DR #104 TAMARAC, FL 33321 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP RASKIN, MINDY 8010 COLONY CIRCLE N #106 TAMARAC, FL 33321 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP Rivera, Rafael 8001 Colony Circle North Tamarac, FL 33321 | <input checked="" type="checkbox"/> Change |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP-S Spigel, Pearl 8001 Colony Circle North Tamarac, FL 33321 | <input checked="" type="checkbox"/> Change |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT Cohen, Yaniv 8001 Colony Circle North Tamarac, FL 33321 | <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DAS Burbano, Wilson 8001 Colony Circle North Tamarac, FL 33321 | <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Levy, David 8001 Colony Circle North Tamarac, FL 33321 | <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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]* **BOB President 3/20/06** **954-722-5688**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #