

**2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 21, 2009  
Secretary of State**

DOCUMENT# 739561

Entity Name: VILLA VERSAILLES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

724 BROAD AVE SOUTH  
NAPLES, FL 34102 US

**New Principal Place of Business:**

**Current Mailing Address:**

724 BROAD AVE SOUTH  
NAPLES, FL 34102 US

**New Mailing Address:**

FEI Number: 59-1889193      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

DUNPHY, TERRELL C  
724 BROAD AVE SOUTH  
NAPLES, FL 341027330 US

**Name and Address of New Registered Agent:**

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: TERRELL C. DUNPHY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CHIUNTI, HECTOR  
Address: 746 BROAD AVE S  
City-St-Zip: NAPLES, FL 34102

Title: VD ( ) Delete  
Name: ZAWISTOSKI, SHIRLEY  
Address: 722 BROAD AVE SOUTH  
City-St-Zip: NAPLES, FL 341027330

Title: TD ( ) Delete  
Name: DUNPHY, TERRELL  
Address: 724 BROAD AVE SOUTH  
City-St-Zip: NAPLES, FL 341027330

Title: D ( ) Delete  
Name: SORRENTINO, AL  
Address: 726 BROAD AVE S  
City-St-Zip: NAPLES, FL 34102

Title: SD ( ) Delete  
Name: BARICKMAN, BARBARA  
Address: 706 BROAD AVE S  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TERRELL C. DUNPHY

Electronic Signature of Signing Officer or Director

TD

10/21/2009

Date