

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000073554

Entity Name

VERSAILLES Group, INC.

**FILED**  
**Jun 07, 2000 8:00 am**  
**Secretary of State**

05-04-2000 90119 022 \*\*\*150.00

Principal Place of Business Mailing Address  
5101 INAGUA WAY PO BOX 110433  
NAPLES, FLA 34119 NAPLES, FLA  
34108-0108

Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For  
59-3528591 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE LAW FIRM OF LAWRENCE J. SPIEGEL,  
dba AMERITLAWYER  
343 ALMERIA AVE.  
CORAL GABLES, FLA 33134

Name RONALD W. TENARLO  
Street Address (P.O. Box Number is Not Acceptable)  
5101 INAGUA WAY  
City NAPLES FL Zip Code 34119

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 Ronald W. Tenarlo Sec./Treasurer, RONALD W. TENARLO 19 APRIL 2000  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOSEPH D'ANGELO	
STREET ADDRESS	5101 INAGUA WAY	
CITY-ST-ZIP	NAPLES, FLA 34119	
TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICARDO MCCORMICK	
STREET ADDRESS	5101 INAGUA WAY	
CITY-ST-ZIP	NAPLES, FLA 34119	
TITLE	SEC./TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RONALD W. TENARLO	
STREET ADDRESS	5101 INAGUA WAY	
CITY-ST-ZIP	NAPLES, FLA 34119	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	(NO CHANGES OR ADDITIONS)	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronald W. Tenarlo Sec./Treas.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19 APRIL 2000 (941) 593-7929  
Date Daytime Phone #

CR2E034 (9/99)