

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739561

FILED
Apr 24, 2023
Secretary of State
7452648073CC

Entity Name: VILLA VERSAILLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O GOLDEN PROPERTY MANAGEMENT SERVICES, LLC
4099 TAMIAMI TRAIL N. SUITE 403
NAPLES, FL 34103

Current Mailing Address:

C/O GOLDEN PROPERTY MANAGEMENT SERVICES, LLC
4099 TAMIAMI TRAIL N. SUITE 403
NAPLES, FL 34103 US

FEI Number: 59-1889193

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOLDEN PROPERTY MANAGEMENT SERVICES
C/O GOLDEN PROPERTY MANAGEMENT SERVICES, LLC
4099 TAMIAMI TRAIL N. SUITE 403
NAPLES, FL 34103 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: JESSICA MACERA

04/24/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name DUNPHY, TERRELL
Address C/O GOLDEN PROPERTY
 MANAGEMENT SERVICES, LLC
 4099 TAMIAMI TRAIL N. SUITE 403
City-State-Zip: NAPLES FL 34103

Title PRESIDENT
Name PLACK, LYNN
Address C/O GOLDEN PROPERTY
 MANAGEMENT SERVICES, LLC
 4099 TAMIAMI TRAIL N. SUITE 403
City-State-Zip: NAPLES FL 34103

Title VP
Name BASCONI, SANDY
Address C/O GOLDEN PROPERTY
 MANAGEMENT SERVICES, LLC
 4099 TAMIAMI TRAIL N. SUITE 403
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name NICHOLS, GERRY
Address C/O GOLDEN PROPERTY
 MANAGEMENT SERVICES, LLC
 4099 TAMIAMI TRAIL N. SUITE 403
City-State-Zip: NAPLES FL 34103

Title SECRETARY
Name BURNS, MARY
Address C/O GOLDEN PROPERTY
 MANAGEMENT SERVICES, LLC
 4099 TAMIAMI TRAIL N. SUITE 403
City-State-Zip: NAPLES FL 34103

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: LYNN PLACK

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04/24/2023

Electronic Signature of Signing Officer/Director Detail

Date