

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 08, 2008  
Secretary of State**

DOCUMENT# L04000000685

Entity Name: BIMINI INN, LLC

**Current Principal Place of Business:**

1618 S. FEDERAL HWY  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

1130 S. LAKESIDE DRIVE  
LAKE WORTH, FL 334605206

**New Mailing Address:**

FEI Number: 34-1987895      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

PARSONS, SALLY M  
1130 S. LAKESIDE DRIVE  
LAKE WORTH, FL 334605206 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PARSONS, SALLY M  
Address: 1130 S. LAKESIDE DRIVE  
City-St-Zip: LAKE WORTH, FL 334605206

**ADDITIONS/CHANGES:**

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SALLY PARSONS

MGR

05/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date