2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000005728

FILED Apr 23, 2008 Secretary of State

Entity Name: BIMINI BAY II AT TARPON BAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: C/O INTEGRATED PROPERTY MGMT. 3435-10TH ST NORTH SUITE 201 NAPLES, FL 34103 Current Mailing Address: C/O INTEGRATED PROPERTY MGMT. 3435-10TH ST NORTH SUITE 201 NAPLES, FL 34103			New Principal Place of Business:		
			2050 CASTAWAYS COURT NAPLES, FL 34119		
			New Mailing Address:		
			2050 CASTAWAYS COURT NAPLES, FL 34119		
FEI Number	: 59-3687123	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()		
Name and	d Address of (Current Registered Agent	Name and Address of New Registered Agent:		
3435 10TH SUITE 20 ¹ NAPLES,	H ST NORTH 1 FL 34103 US		IANNONE, ANTHONY E CAM 2050 CASTAWAYS COURT NAPLES, FL 34119 US		
	e named entity e of Florida.	submits this statement for ti	e purpose of changing its registered office or registered agent, or both,		
SIGNATURE: ANTHONY E. IANNONE			04/23/2008		
	Electro	nic Signature of Registered	Agent Date		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	BAKER, SUSA 1642 TARPON	BAY DR S #102	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	MIRRA, LEON 1630 TARPON	BAY DR S #101	Title: T (X) Change () Addition Name: MAIN, DOUG Address: 1634 TARPON BAY DR S #101 City-St-Zip: NAPLES, FL 34119		
Title: Name: Address: City-St-Zip:	LESNIAK, FRA 1622 TARPON	BAY DR S #102	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	GONZALEZ, M	BAY DR SOUTH SUITE 202	Title: S (X) Change () Addition Name: GONZALEZ, MANNY Address: 1622 TARPON BAY DR SOUTH SUITE 202 City-St-Zip: NAPLES, FL 34119		
Title:	() Delete	Title: D () Change (X) Addition		

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: FRANK LESNIAK P 04/23/2008