

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 26, 2006
Secretary of State

DOCUMENT# 715898

Entity Name: BIMINI KEY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**45 YACHT CLUB DRIVE
213
NORTH PALM BEACH, FL 33408**New Principal Place of Business:****Current Mailing Address:**45 YACHT CLUB DRIVE
213
NORTH PALM BEACH, FL 33408**New Mailing Address:****FEI Number:** 59-1290351**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**OBRIEN, CHRISTOPHER J
P. O. BOX 14547
NORTH PALM BEACH, FL 33408 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: OBRIEN, CHRISTOPHER J
Address: P. O. BOX 14547
City-St-Zip: N PALM BCH, FL 33408 US**Title:** TD () Delete
Name: CHIPPAS, TINA
Address: 45 YACHT CLUB DR. #211
City-St-Zip: NORTH PALM BEACH, FL 33408 US**Title:** D () Delete
Name: SACCO, ANTHONY J
Address: 557 HIGH STREET
City-St-Zip: HANSON, MA 02351 US**Title:** VD () Delete
Name: FINTAK, RONALD
Address: 7226 ELLICOT ROAD
City-St-Zip: ORCHARD PARK, NY 14127 US**Title:** DS () Delete
Name: HERRON, TERESITA D
Address: 45 YACHT CLUB DRIVE #101
City-St-Zip: NORTH PALM BEACH, FL 33408 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD (X) Change () Addition
Name: KNIGHT, JAMES W
Address: 4412 NW 73 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065 US**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 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: CHRISTOPHER J. OBRIEN

PRES

07/26/2006

Electronic Signature of Signing Officer or Director

Date