

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715898

FILED
Jan 18, 2009
Secretary of State

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:

URBANSKI, DONALD
45 YACHT CLUB
APT. 201
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: URBANSKI, JR., DONALD
Address: 45 YACHT CLUB DR., 201
City-St-Zip: N PALM BCH, FL 33408 US

Title: D () Delete
Name: KNIGHT, JAMES
Address: 4412 NW 73 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: VD () Delete
Name: SOCCO, ANTHONY J
Address: 557 HIGH STREET
City-St-Zip: HANSON, MA 02351 US

Title: TD () Delete
Name: VANDERMGER, ROBERTA
Address: 45 YACHT CLUB DR STE 105
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: DS () Delete
Name: DAVIS, BARBARA S
Address: 3549 PEBBLE BCH RD
City-St-Zip: LAKEVILLE, NY 14480 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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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 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: BARBARA DAVIS

DS

01/18/2009

Electronic Signature of Signing Officer or Director

Date