

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742909

FILED  
Feb 28, 2012  
Secretary of State

**Entity Name:** BIMINI APARTMENTS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

330 TUDOR DRIVE  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 100831  
CAPE CORAL, FL 33910 US

**New Mailing Address:**

FEI Number: 59-6173358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TEAGUE, GEORGE  
3501 DEL PRADO BLVD#100  
CAPE CORAL, FL 33904 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: T  
Name: GUILLERMO, REY  
Address: 3501 DEL PRADO BLVD; STE100  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: S  
Name: BIANCALANA, ROBERT  
Address: 3501 DEL PRADO BLVD; STE 100  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D  
Name: BEALE, MALCOM  
Address: 3501 DEL PRADO BLVD; STE 100  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP  
Name: WILLIAM, MARINO  
Address: 3501 DEL PRADO BLVD; STE 100  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: P  
Name: BELL, DON  
Address: 3501 DEL PRADO BLVD; STE 100  
City-St-Zip: CAPE CORAL, FL 33904 US

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: GEORGE TEAGUE

RA

02/28/2012

Electronic Signature of Signing Officer or Director

Date