

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753464

FILED  
Feb 28, 2009  
Secretary of State

Entity Name: BIMINI RUN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2801 MAGDALINA DRIVE  
UNIT 1-D  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

100 SULLIVAN ST  
UNIT 112  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

FEI Number: 59-2807206      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GREENE, JOAN  
C/O ACCURATE ACCOUNTING  
100 SULLIVAN ST-STE 112  
PUNTA GORDA, FL 33950 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: VPD ( ) Delete  
Name: CHARTERS, ALBERT  
Address: 1890 DEBORAH DR #30  
City-St-Zip: PORT CHARLOTTE, FL 33952

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TD ( ) Delete  
Name: GREENE, JOAN F  
Address: 265 TAMAIMI TRAIL  
City-St-Zip: PUNTA GORDA, FL 33950

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

Title: PD ( ) Delete  
Name: MILTON, NINIA  
Address: 2735 MAGNOLIA DR #2C  
City-St-Zip: PUNTA GORDA, FL 33950

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

Title: D ( ) Delete  
Name: LEITER, MARGARET  
Address: 2801 MAGNOLIA DR  
City-St-Zip: PUNTA GORDA, FL 33950

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: MILTON NINIA

PRES

02/28/2009

Electronic Signature of Signing Officer or Director

Date