

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001602

FILED
Apr 21, 2005
Secretary of State

Entity Name: THE BIMINI AT TARPON COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

265 AIRPORT ROAD SOUTH
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-3477635 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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: FISKIO, LENORE
Address: 906 VARRICK BEND CIRCLE #102
City-St-Zip: NAPLES, FL 34110

Title: VPD () Delete
Name: PEARSON, JIM
Address: 881 CARRICK BEND CIRCLE #201
City-St-Zip: NAPLES, FL 34110

Title: STD () Delete
Name: FEE, DOUGLAS
Address: 921 CARRICKB END CIRCLE #201
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GHERSTEIN, DIANA
Address: 873 CARRICK BEND CIRCLE #201
City-St-Zip: NAPLES, FL 34110

Title: VPD (X) Change () Addition
Name: VOSS, ROBERT
Address: 905 CARRICK BEND CIRCLE #101
City-St-Zip: NAPLES, FL 34110

Title: STD (X) Change () Addition
Name: DISTLER, ROBERT
Address: 873 CARRICKB END CIRCLE #101
City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GLENN CARROLL

PRES

04/21/2005

Electronic Signature of Signing Officer or Director

_____ Date