

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90350 042 ****61.25

DOCUMENT # N98000001930

1. Entity Name
BIMINI GARDENS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**4720 SE 15TH AVE
SUITE 205
CAPE CORAL, FL 33904**

Mailing Address
**4720 SE 15TH AVE
SUITE 205
CAPE CORAL, FL 33904**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03282006 Chg-NP CR2E037 (11/05)

4. FEI Number
38-2167386

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KIRCHMER, LAURENCE L SR
CAPE SUNSET REALTY INC
4307 DEL PRADO BLVD UNIT 3
CAPE CORAL, FL 33904**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
HOLMAN, ALEX
20 RUNNING TIDE DRIVE
SCARBOROUGH, ME 04074** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2V
MUNROE, WARREN
5101 CORONADO PKWY #106
CAPE CORAL, FL 33904** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
RIZZO, JOE
715 PENNSYLVANIA AVE
LYNDHURST, NJ 07071** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HODGKINS, PAT
9 GAMBIA STREET
HUDSON, NH 03051** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ARENDTS, SIDNEY
37 WINDSOR AVE
BUFFALO, NY 14209** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Corcoran, John
6460 West Belle Plaine AVE #206
Chicago, IL 60634** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2V Adam Lohrfinck
5109 Coronado Pkwy #106
Cape Coral, FL 33904** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John Corcoran

3/29/06

713-343-9090