2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 04, 2005 08:00 AM Secretary of State DOCUMENT # P98000046711 1. Entity Name BIMINI'S THREE, INC. Principal Place of Business Mailing Address 997 N COLLIER BLVD 997 N COLLIER BLVD STE G STE G MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 CR2E034 (10/03) 03192005 No Cha-P ١ DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3512885 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent REINDERS, JAMES M DO NOT WRITE 997 N COLLIER BLVD STE G MARCO ISLAND, FL 34145 IN THIS SPACE 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. DATE Signature, typed or printed name of registered agent and little it applicable (NOTE, Registered Agent signature required when reinstaling) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE 13 \$150.00 After May 1, 2005 Fee will be \$550.08 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE REINDERS, JAMES M NAME. 997 N COLLIER BLVD STE G STREET ADDRESS CITY-ST-ZIP MARCO ISLAND, FL 34145 1100000285940 04/714/05-80008-014 150.00 TITLE NAME SNYDER, WILLIAM F 997 N COLLIER BLVD STE G STREET ADDRESS CITY-ST-ZIP MARCO ISLAND, FL 34145 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P 12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an articless, with all other like empowered.

WILHAM

ITED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE:

SIGNATURE AND THE PRI

FILED