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| Dwyer Robe Form 4 | | | | | | | | | | | |
|--|--|-------------|---|---|-------------|-----------|---|---|--|---------------------|--|
| August 24, 2 | | | | | | | | | | | |
| FORM | 4 UNITED | STATES | | | | | NGE C | COMMISSION | OMB AI OMB Number: | PROVAL 3235-0287 | |
| Check th | nis box | | was | hington, | D.C. 205 | 949 | | | | January 31, | |
| if no longer subject to Section 16. Form 4 or | | | | SECUR | ITIES | | Expires: Estimated a burden hou response | rs per | | | |
| Form 5 obligatio may con <i>See</i> Instr 1(b). | tinue. Section 17 | a) of the l | Public Ut | | ing Com | pany | Act of | e Act of 1934, E 1935 or Section 40 | n | | |
| (Print or Type | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Dwyer Robert J | | | 2. Issuer Name and Ticker or Trading Symbol BIMINI CAPITAL | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | MANA | GEMENT | , INC. [E | BMN | M] | (Chec. | k all applicable | ;) | |
| (Last) (First) (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | VI CAPITAL MENT, INC., 330 O DRIVE |)5 | 08/22/20 | 011 | | | | below) | below) | | |
| | (Street) 4. If Ame Filed(Mor | | | | te Original | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| VERO BEA | ACH, FL 32963 | | | | | | | Form filed by M Person | Iore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | ecuri | ties Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, | | n Date, if | Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) //Year) (Instr. 8) (A) | | | | Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Class A | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 08/22/2011 | | | Р | 20,000 | А | \$ 0.71 | 700,477 | D | | |
| Class A Common Stock | 08/23/2011 | | | Р | 8,486 | А | \$ 0.71 | 708,963 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| Security or (Instr. 3) Pr D | | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|-----------------------------------|-----|---|---|---|--|---|---------------------|--------------------|---|--|---|--|
| Rep | oor | ting O | wners | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

| Reporting O | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| in porting o | Director | 10% Owner | Officer | Other | | | |
| Dwyer Robert J C/O BIMINI CAPIT 3305 FLAMINGO D VERO BEACH, FL | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ Robert J. Dwyer | 08/23/2011 | | | | | | |
| <u>**</u> Signature of Reporting Person | Date | | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.