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Mar 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 740751 (3)

1. Corporation Name
ROCK CREEK, INC.Principal Place of Business
11700 STONEBRIDGE PARKWAY
COOPER CITY FL 33026Mailing Address
11700 STONEBRIDGE PARKWAY
COOPER CITY FL 33026-11163. Date Incorporated or Qualified 11/10/1977
3a. Date of Last Report 03/15/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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25

29

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4. FEI Number
59-2003983Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NACHMAN, IRVIN W
4441 STIRLING ROAD
FT LAUDERDALE FL 33314

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME ZINKIL, BILL
STREET ADDRESS 11903 FLICKER WAY
CITY-ST-ZIP COOPER CITY FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE DV ☒ DELETE
NAME PATTERSON, JOSEPH
STREET ADDRESS 11801 S ISLAND DRIVE
CITY-ST-ZIP COOPER CITY FL2.1 TITLE PETER RICHMAN (PRES) ☐ Change ☒ Addition
2.2 NAME 11607 SUNFISH WAY
2.3 STREET ADDRESS COOPER CITY FLA 33026
2.4 CITY-ST-ZIPTITLE S ☒ DELETE
NAME GRUTMAN, RENEE
STREET ADDRESS 2905 CARDINAL DRIVE
CITY-ST-ZIP COOPER CITY FL3.1 TITLE STEVEN MASON (VP) ☐ Change ☒ Addition
3.2 NAME 11270 SUN VIEW WAY
3.3 STREET ADDRESS COOPER CITY FLA 33026
3.4 CITY-ST-ZIPTITLE T ☐ DELETE
NAME PEKAREK, JAMES
STREET ADDRESS 11725 KIMMIE DRIVE
CITY-ST-ZIP COOPER CITY FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE VP ☐ DELETE
NAME LOWENTHAL, LARRY
STREET ADDRESS 11565 N. QUAYSIDE DRIVE
CITY-ST-ZIP COOPER CITY FL5.1 TITLE (D) LARRY LOWENTHAL ☐ Change ☐ Addition
5.2 NAME 11565 N QUAYSIDE DRV
5.3 STREET ADDRESS COOPER CITY FLA 33026
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME MINNAUGH, VICKI
STREET ADDRESS 17905 NW 15TH ST.
CITY-ST-ZIP PEMBROKE PINES FL6.1 TITLE (SEC) JOCYLIN WILLS ☐ Change ☒ Addition
6.2 NAME 2860 W AURIARY DRV
6.3 STREET ADDRESS COOPER CITY FLA 33026
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: TOM CHADWICK MANAGER 2.22.97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0023877

CR2E037 (9/96)