

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 740751 (3)

1. Corporation Name

ROCK CREEK, INC.

11700 STONEBRIDGE PKWY COOPER CITY FLA 33026

Principal Place of Business

Mailing Address

11700 STONEBRIDGE PARKWAY  
COOPER CITY FL 33026

11700 STONEBRIDGE PARKWAY  
COOPER CITY FL 33026



2. Principal Place of Business	2a. Mailing Address
21 11700 STONEBRIDGE	26 11700 STONEBRIDGE PKWY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 COOPER CITY FLA	28 COOPER CITY FLA
Zip	Zip
24 33026	29 33026
Country	Country
30	

3. Date Incorporated or Qualified	3a. Date of Last Report
11/10/1977	03/16/1995
4. FEI Number	Applied For
59-2003983	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current 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
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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	RICHMAN, PETER	
STREET ADDRESS	11607 SUNFISH WAY	
CITY-ST-ZIP	COOPER CITY FL	
TITLE	DV	DELETE
NAME	PATTERSON, JOSEPH	
STREET ADDRESS	11801 S ISLAND DRIVE	
CITY-ST-ZIP	COOPER CITY FL	
TITLE	S	DELETE
NAME	GRUTMAN, RENEE	
STREET ADDRESS	2905 CARDINAL DRIVE	
CITY-ST-ZIP	COOPER CITY FL	
TITLE	T	DELETE
NAME	PEKAREK, JAMES	
STREET ADDRESS	11725 KIMMIE DRIVE	
CITY-ST-ZIP	COOPER CITY FL	
TITLE	D	DELETE
NAME	LOWENTHAL, LARRY	
STREET ADDRESS	11565 N. QUAYSIDE DR	
CITY-ST-ZIP	COOPER CITY FL	
TITLE	D	DELETE
NAME	MINNAUGH, VICKI	
STREET ADDRESS	17905 NW 15TH ST.	
CITY-ST-ZIP	PEMBROKE PINES FL	

13.

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
	BILL ZINKIL	11903 FLICKER WAY	COOPER CITY FL		
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
	LOWENTHAL, LARRY	11565 N. QUAYSIDE DR	COOPER CITY FLA		
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SECRETARY  
TOM CHADWICK 8.4.96 435.1727