

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751209

1. Entity Name

ROCK ISLAND COMMUNITY DEVELOPMENT, INC.

Principal Place of Business

2900 NORTHWEST 20TH STREET
FT. LAUDERDALE FL 33311

Mailing Address

2900 NORTHWEST 20TH STREET
FT. LAUDERDALE FL 33311-3206

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0123939

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HINTON, RICHARD J
2900 NORTHWEST 20TH STREET
FT. LAUDERDALE FL 33311

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	HINTON, RICHARD J	
STREET ADDRESS	2900 NORTHWEST 20TH STREET	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	DERICO, JOSEPHINE	
STREET ADDRESS	2921 N.W. 23RD STREET	
CITY-ST-ZIP	FT LAUDERDALE 33 33311	
TITLE	TD	<input type="checkbox"/> Delete
NAME	TREMBLE, EVELEYN	
STREET ADDRESS	2951 N W 29TH TERR	
CITY-ST-ZIP	FT LAUDERDALE FL 33311	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	COPELAND, ORIAN	
STREET ADDRESS	3000 NORTHWEST 21ST COURT	
CITY-ST-ZIP	FT LAUDERDALE FL 33311	
TITLE	PAR	<input checked="" type="checkbox"/> Delete
NAME	HANKERSON, ERNESTINE	
STREET ADDRESS	2145 NORTHWEST 29 TERRACE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LAMBERT, SADIE	
STREET ADDRESS	2020 NW 30TH WAY	
CITY-ST-ZIP	FT LAUDERDALE FL 33311	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	JD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES-FUCE	
STREET ADDRESS	2220 NORTHWEST 30TH AVENUE	
CITY-ST-ZIP	FT LAUDERDALE, FL 33311	
TITLE	AT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HANKERSON, ERNESTINE	
STREET ADDRESS	2145 NORTHWEST 29TH TERRACE	
CITY-ST-ZIP	FT LAUDERDALE FL 33311	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 677, 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:

RICHARD J HINTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)