

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90210 009 ***158.75

DOCUMENT # G36411

1. Entity Name
ROCK CREEK ACADEMY, INC.



Principal Place of Business
**% CAROL A. NAPOLI
2700 STONEBRIDGE PARKWAY
COOPER CITY, FL 33026**

Mailing Address
**6401 HANCOCK RD
FT. LAUDERDALE, FL 33330 US**

60001218



01112007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-2294168

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NAPOLI, CAROL A.
2700 STONEBRIDGE PARKWAY
COOPER CITY, FL 33026**

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP NAPOLI, CAROL A. 6401 HANCOCK RD FT. LAUDERDALE, FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NAPOLI, RICHARD A 6401 HANCOCK RD FT. LAUDERDALE, FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOHAN, MARY 6401 HANCOCK RD FT LAUDERDALE, FL 33330	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NAPOLI, JILL T VP 6401 HANCOCK ROAD FORT LAUDERDALE, FL 33330	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CAROL A. NAPOLI 6401 HANCOCK RD FT. LAUDERDALE, FL	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS NAPOLI, RICHARD 6401 HANCOCK RD FT. LAUDERDALE, FL	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 address, with all other like empowered.

SIGNATURE:

Carol A. Napoli

1/10/07

9544352380

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #