

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2005 8:00 am
Secretary of State

04-26-2005 90162 036 ***150.00

DOCUMENT # P04000007546

1. Entity Name
ROCK CREEK PHASE II CORPORATION



Principal Place of Business
**3100 NORTH RD
NAPLES, FL 34104**

Mailing Address
**3100 NORTH RD
NAPLES, FL 34104**

66018395



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04202005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

58-2681391

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**STEWART, JAMES C JR
STEWART & STORTER, ATTORNEYS AT LAW
STE 700, 9180 GALLERIA CT
NAPLES, FL 34109**

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 Agents signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 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
**D
NEBUS, IVY J
3100 NORTH RD
NAPLES, FL 34104**

☐ Delete

TITLE
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STREET ADDRESS
CITY- ST- ZIP

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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 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:

JOHNNIE NEBUS
**JOHNNIE NEBUS
OFFICER**

4-22-05

SIGNATURE AND TYPED OR PRINTED NAME OF EXEMPT OFFICER OR DIRECTOR

Date

Daytime Phone #