

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000122021

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: ROCK CREEK INVESTMENT ADVISORS, INC.

## Current Principal Place of Business:

1200 RIVERPLACE BLVD.  
SUITE 902  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

501 RIVERSIDE AVE., SUITE 902  
JACKSONVILLE, FL 32202

## Current Mailing Address:

501 RIVERSIDE AVE, SUITE 902  
JACKSONVILLE, FL 32202

## New Mailing Address:

FEI Number: 20-5739268

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, BETH  
1200 RIVERPLACE BLVD  
SUITE 902  
JACKSONVILLE, FL 32207 US

## Name and Address of New Registered Agent:

WILLIAMS, BETH  
501 RIVERSIDE AVE., SUITE 902  
JACKSONVILLE, FL 32202 US

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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DAHL, JAMES H  
Address: 1200 RIVERPLACE BLVD. #902  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: CAHOON, ARTHUR L  
Address: 1200 RIVERPLACE BLVD. #902  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: HUDSON, ASHTON  
Address: 1200 RIVERPLACE BLVD. #902  
City-St-Zip: JACKSONVILLE, FL 32207

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DAHL, JAMES H  
Address: 501 RIVERSIDE AVE., SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change ( ) Addition  
Name: CAHOON, ARTHUR L  
Address: 501 RIVERSIDE AVE., SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change ( ) Addition  
Name: HUDSON, ASHTON  
Address: 501 RIVERSIDE AVE., SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ASHTON HUDSON

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date