

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 685891

FILED
Mar 08, 2005
Secretary of State

Entity Name: INTERVEST INTERNATIONAL, INC.

Current Principal Place of Business:

1980 DOMINION WAY
STE 202
COLORADO SPRINGS, CO 80918 US

New Principal Place of Business:

Current Mailing Address:

1980 DOMINION WAY
SUITE 202
COLORADO SPRINGS, CO 80918 US

New Mailing Address:

FEI Number: 59-2017531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNELIUS, BENJAMIN A
4496 SOUTHSIDE BLVD #200
JAX, FL 32216 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMITH, DAVID MICHAEL,
Address: 4303 N LAKE DR
City-St-Zip: SHOREWOOD, WI

Title: V () Delete
Name: COPUS, ROBERT E
Address: 3380 BELL MOUNTAIN DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80918

Title: T () Delete
Name: GOTTMAN, LINDA J
Address: 220 POINTER PLACE
City-St-Zip: COLORADO SPRINGS, CO 80911

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SMITH, DAVID MICHAEL,
Address: 4303 N LAKE DR
City-St-Zip: SHOREWOOD, WI

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: GOTTMAN, LINDA J
Address: 1965 BULA DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80915

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LINDA GOTTMAN

TREA

03/08/2005

Electronic Signature of Signing Officer or Director

_____ Date