## 2006 FOR PROFIT CORPORATION

## FILED **ANNUAL REPORT** Jan 23, 2006 08:00 AN DOCUMENT # F99000001144 **Secretary of State** INTERVEST PROPERTY MANAGEMENT, LTD., INCORPORATED Principal Place of Business Mailing Address 15 EAST 5TH STREET, SUITE 2700 15 EAST 5TH STREET, SUITE 2700 **TULSA, OK 74103** TULSA, OK 74103 01052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 73-1212602 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MURDOCH, ROBERT E DO NOT WRITE 790 EAST BROWARD BOULEVARD, SUITE 400 FORT LAUDERDALE, FL 33301 IN THIS SPACE 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 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. **PCS** TITLE WILLIAMS, DALE NAME 0000000394954 01/26/06/80030-020 150.00 STREET ADDRESS 15 EAST 5TH STREET, SUITE 2700 CITY-ST-78P TULSA, OK 74103 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IMLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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: \_

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR