

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90202 028 ***150.00

DOCUMENT # J82404

1. Entity Name
INTERVENT, INC.



Principal Place of Business
13134 HWY 301
DADE CITY, FL 33526 US

Mailing Address
P.O. BOX 2177
DADE CITY, FL 33526-2177 US



04112007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2836585

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANDERTON, FAYE M.
12640 ABBEY DR 38014 Blackbird Ln
DADE CITY, FL 33526
Zephyr Hills, FL 33540

**DO NOT WRITE
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 _____

**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

TITLE	P
NAME	ANDERTON, THOMAS L. (JR)
STREET ADDRESS	11424 GRANDVIEW DRIVE
CITY - ST - ZIP	DADE CITY, FL
TITLE	ST
NAME	ANDERTON, JANET M.
STREET ADDRESS	11424 GRANDVIEW DRIVE
CITY - ST - ZIP	DADE CITY, FL
TITLE	T
NAME	ANDERTON, FAYE M
STREET ADDRESS	12640 ABBEY DR 38014 Blackbird Ln
CITY - ST - ZIP	DADE CITY, FL 33526 Zephyr Hills FL 33540
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Thomas L. Anderton Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-07
Date Daytime Phone #