

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M73544

FILED
Mar 17, 2009
Secretary of State

Entity Name: INTERVEST INTERNATIONAL EQUITIES CORPORATION

Current Principal Place of Business:

1980 DOMINION WAY
SUITE 202
COLORADO SPRINGS, CO 80918

New Principal Place of Business:

Current Mailing Address:

1980 DOMINION WAY
SUITE 202
COLORADO SPRINGS, CO 80918

New Mailing Address:

FEI Number: 98-0096287 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MATTESON, JOHN
4496 SOUTHSIDE BLVD
JACKSONVILLE, 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: DPS () Delete
Name: SMITH, DAVID M PRES.
Address: 1570 E OLIVE
City-St-Zip: SHOREWOOD, WI 53211

Title: V () Delete
Name: COPUS, ROBERT E
Address: 3330 BELL MOUNTAIN DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80918

Title: T () Delete
Name: WATTS, KACEY B
Address: 3125 RIVER VALLEY VIEW
City-St-Zip: COLORADO SPRINGS, CO 80922

Title: S () Delete
Name: WATTS, KACEY B
Address: 3125 RIVER VALLEY VIEW
City-St-Zip: COLORADO SPRINGS, CO 80922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: KACEY B WATTS

T

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date