## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N49785

Entity Name: INTERVENTION SERVICES, INC.

FILED May 25, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4910 CREEKSIDE DRIVE SUITE D CLEARWATER, FL 33760 **Current Mailing Address: New Mailing Address:** 620 NORTH CRAYCROFT TUCSON, AZ 85711 FEI Number: 65-0439778 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete MCCUSKER, FLETCHER MINNIS, ANTHONY D Name: Name: 620 N.CRAYCROFT Address: 29044 OLD MILL WEST Address: City-St-Zip: TUCSON PARK, AZ 85711 US City-St-Zip: TAVARES, FL 32778 US Title: PD () Delete Title: (X) Change ( ) Addition Name: FAVIS, MARTIN Name: FAVIS, MARTIN Address: 35 KNOLLWOOD ESTATES DRIVE Address: 4910-D CREEKSIDE DR City-St-Zip: ORMOND BEACH, FL 32174 US City-St-Zip: CLEARWATER, FL 33760 US Title: () Delete Title: DVP (X) Change ( ) Addition ERDMANN, HANS BECKER, SUSAN Name: Name: 28935 EAST STATE ROAD 44 150 SPARTAN DRIVE Address: Address: City-St-Zip: EUSTIS, FL 32736 US City-St-Zip: MAITLAND, FL 32751 US (X) Change ( ) Addition Title: () Delete Title: Name: DEITCH, MICHAEL Name: DIBRIZZI, MIKE 4910-D CREEKSIDE DR Address: 620 N.CRAYCROFT Address: City-St-Zip: TUCSON, AZ 85711 City-St-Zip: CLEARWATER, FL 33760 US Title: () Delete Title: ( ) Change (X) Addition REINECKER, CHRIS Name: Name: 4910-D CREEKSIDE DR Address: Address: City-St-Zip: City-St-Zip: CLEARWATER, FL 33760 US Title: () Delete Title: ( ) Change (X) Addition MOHR, ROBERT Name: Name: Address: Address: 334 LOWNDES AVE ORMOND BEACH, FL 32174 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS REINECKER DST 05/25/2004

THOMAS O'BRIEN, DIRECTOR 4910-D CREEKSIDE DR CLEARWATER, FL 33760