2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N49785

Entity Name: INTERVENTION SERVICES, INC.

Current Principal Place of Business:

150 SPARTAN DR
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

150 SPARTAN DR
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 65-0439778 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CONNELL, JODA D
Address: 150 SPARTAN DRIVE
City-St-Zip: MAITLAND, FL 32751 US

Title: S ( ) Delete
Name: BAZNIK, ANNA
Address: 150 SPARTAN DR
City-St-Zip: MAITLAND, FL 32751 US

Title: S ( ) Delete
Name: CARD, CHRIS
Address: 4910 E CREEKSIDE DR
City-St-Zip: CLEARWATER, FL 33760 US

Title: CP ( ) Delete
Name: SCANLON, VIRGINIA
Address: 150 SPARTAN DRIVE
City-St-Zip: MAITLAND, FL 32751 US

Title: D ( ) Delete
Name: JONES, JEFFREY
Address: 150 SPARTAN DR.
City-St-Zip: MAITLAND, FL 32751 US

Title: D ( ) Delete
Name: PEACOCK, SUSAN
Address: 150 SPARTAN DRIVE
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEO (X) Change ( ) Addition
Name: BAZNIK, ANNA
Address: 150 SPARTAN DR
City-St-Zip: MAITLAND, FL 32751 US

Title: CFO (X) Change ( ) Addition
Name: VELASQUEZ, ISABEL
Address: 4910 E CREEKSIDE DR
City-St-Zip: CLEARWATER, FL 33760 US

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

SIGNATURE: ANNA BAZNIK CEO 04/13/2009

Electronic Signature of Signing Officer or Director — Date