2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 12, 2012
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:

668 N. ORLANDO AVE
210
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: CP
Name: CONNELL, JODA D
Address: 668 N. ORLANDO AVE SUITE 210
City-St-Zip: MAITLAND, FL 32751 US

Title: CEO
Name: BAZNIK, ANNA
Address: 668 N. ORLANDO AVE SUITE 210
City-St-Zip: MAITLAND, FL 32751 US

Title: CFO
Name: VELASQUEZ, ISABEL
Address: 668 N. ORLANDO AVE SUITE 210
City-St-Zip: MAITLAND, FL 32751 US

Title: TR
Name: SPOONER, JENNIFER
Address: 668 N. ORLANDO AVE SUITE 210
City-St-Zip: MAITLAND, FL 32751 US

Title: D
Name: GAINER, BARRY
Address: 668 N. ORLANDO AVE SUITE 210
City-St-Zip: MAITLAND, FL 32751 US

Title: D
Name: FRYE, CHERYLE
Address: 668 N. ORLANDO AVE SUITE 210
City-St-Zip: MAITLAND, FL 32751

I hereby 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 all other like empowered.

SIGNATURE: ISABEL VELASQUEZ CFO 06/12/2012

Electronic Signature of Signing Officer or Director — Date