

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N99000005401

1. Entity Name
DEVINE INTRAVENTION, INC.



Principal Place of Business
4798 N.W. 41ST COURT
LAUDERDALE LAKES, FL 33319

Mailing Address
4798 N.W. 41ST COURT
LAUDERDALE LAKES, FL 33319

FILED
Sep 08, 2004 08:00 AM
Secretary of State



08232004 No Chg-NP CR2E037 (10/03)

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4. FEI Number 65-1018541	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

WHORLEY, JAMES
4798 N.W. 41ST COURT
LAUDERDALE LAKES, FL 33319

**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 _____

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000171854
09/08/04-80008-014 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT WHORLEY, JAMES 4798 N.W. 41ST COURT LAUDERDALE LAKES, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT WHITE, VICTORIA 7449 N.W. 49TH CT LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WILLIAMS, VALERIE 7060 N.W. 49TH PLACE LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WRIGHT, VANESSA 7260 N.W. 46TH CT LAUDERHILL, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/4/04