

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

05-08-2000 90111 049 \*\*\*150.00

**DOCUMENT # P36694**  
 1. Entity Name  
**INTERVEST CAPITAL CORPORATION**

Principal Place of Business      Mailing Address  
 5750 I 55 N FRONTAGE RD      P.O. BOX 12791  
 JACKSON MS 39211      JACKSON MS 39236-2791  
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**7538 Old Canton Rd**      **P.O. Box 2118**  
 City & State      City & State  
**Madison, MS**      **Madison, MS**  
 Zip      Country      Zip      Country  
**39110-8967**      **Hinds**      **39110-8967**      **Hinds**

4. FEI Number      Applied For  
**64-0693266**      Not Applicable  
 5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**TERKEURST, DUDLEY**  
**3000 JOE ASHTON RD**  
**ST AUGUSTINE FL 32092**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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.  
 SIGNATURE *Stephen J. Nail* V.P.      DATE 04/19/00  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP <b>NAIL, J. STEPHEN</b> <b>5750 I-55 NORTH</b> <b>JACKSON MS 39211</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <b>DUDLEY, RODNEY H.</b> <b>111 ROLLING MEADOWS</b> <b>RIDGELAND MS 39157</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Nail, J. Stephen</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>P.O. Box 2118</b> <b>Madison, MS 39130-2118</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Dudley, Rodney H.</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>P.O. Box 2118</b> <b>Madison, MS 39130-2118</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stephen J. Nail*      DATE: 04/19/00      DAYTIME PHONE #: (601) 709-6000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)