


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90300 011 \*\*\*\*61.25

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<b>DOCUMENT # 709162</b>					
<b>1. Entity Name</b> ECONOMIC OPPORTUNITIES COUNCIL OF INDIAN RIVER COUNTY, INC.					
<b>Principal Place of Business</b> 1456 OLD DIXIE HWY BLDG B VERO BEACH, FL 32960 US		<b>Mailing Address</b> /INDIAN RIVER COUNTY, INC. PO BOX 2766 VERO BEACH, FL 32961 US			
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>		04202006 Chg-NP CR2E037 (11/05)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-1144567	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
PATTEN, BARBARA 1456 OLD DIXIE HWY. BLDG. B VERO BEACH, FL 32960			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relistating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
				Make check payable to Florida Department of State	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FAISON, GERALDINE A		NAME	Mary B. McKinney	
STREET ADDRESS	5926-57TH ST		STREET ADDRESS	5616 41st Street	
CITY-ST-ZIP	VERO BEACH, FL		CITY-ST-ZIP	VERO BEACH, Florida 32967	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACKSON, PATRICIA		NAME	Ralph Watts	
STREET ADDRESS	707 NE 5TH STREET		STREET ADDRESS	17 Palm Court	
CITY-ST-ZIP	OKEECHOBEE, FL 34972		CITY-ST-ZIP	Okeechobee, Florida 34974	
TITLE	PD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GOUDE, DEXTER REV.		NAME	Jimmy Hendricks	
STREET ADDRESS	3525 68TH PLACE		STREET ADDRESS	P.O. Box 32	
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP	Winter Beach, Florida 32971	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CIRILLO, ANJANI		NAME	Sue Rux	
STREET ADDRESS	11105 ROSELNAD RD.		STREET ADDRESS	117 Hinchman Ave.	
CITY-ST-ZIP	SEBASTIAN, FL 32958		CITY-ST-ZIP	Sebastian, Florida 32958	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	REL FORD, CLIFFORD		NAME	Jerry Morgan	
STREET ADDRESS	5730 46TH STREET		STREET ADDRESS	4630 57th Ave.	
CITY-ST-ZIP	VERO BEACH, FL 32967		CITY-ST-ZIP	Vero Beach, Florida 32967	
TITLE	D	<input type="checkbox"/> Delete	TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKER, RICHARD		NAME	Baker, Richard	
STREET ADDRESS	10305 130TH AVE		STREET ADDRESS	10305 130th Ave.	
CITY-ST-ZIP	FELLSMERE, FL 32948		CITY-ST-ZIP	Fellsmere Florida 32948	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
<b>SIGNATURE:</b> <i>Dexter Gonde</i>			04/20/06		(772) 562-7729
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>