

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709162

Entity Name: ECONOMIC OPPORTUNITIES COUNCIL OF INDIAN RIVER COUNTY, INC.**Current Principal Place of Business:**2455 ST. LUCIE AVENUE
VERO BEACH, FL 32960**Current Mailing Address:**INDIAN RIVER COUNTY, INC.
PO BOX 2766
VERO BEACH, FL 32961 US**FEI Number: 59-1144567****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DAVIS-GREEN, ANGELA
2455 ST. LUCIE AVENUE
VERO BEACH, FL 32960 US*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

Officer/Director Detail :

Title	TREASURER
Name	MISTRETTA, VERA
Address	1074 NORMANDIE WAY
City-State-Zip:	VERO BEACH FL 32960

Title	DIRECTOR
Name	JACKSON, VIRGINIA
Address	4296 57TH AVENUE
City-State-Zip:	VERO BEACH FL 32967

Title	DIRECTOR
Name	DOUSI, JOSEPH
Address	613 SE RON RICO TERRACE
City-State-Zip:	PORT ST. LUCIE FL 34983

Title	CHAIRMAN
Name	GILLENWATER, GRANT
Address	610 26TH COURT
City-State-Zip:	VERO BEACH FL 32962

Title	SECRETARY
Name	INGRAM, LONNIE JR.
Address	PO BOX 651432
City-State-Zip:	VERO BEACH FL 32965

Title	DIRECTOR
Name	LESPERANCE, APRIL
Address	102 PEACOCK BLVD
City-State-Zip:	PORT SAINT LUCIE FL 34986

Title	VC
Name	HART, DONALD J SR.
Address	4295 45TH LANE
City-State-Zip:	VERO BEACH FL 32967

Title	DIRECTOR
Name	FLOYD, TEDDY
Address	47-35 43RD AVENUE
City-State-Zip:	VERO BEACH FL 32967

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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: CHRISTIAN PELAEZ**CFO****02/03/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HICKMAN, PATRICIA
Address 3250 NW 160TH STREET
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR
Name PROPER, JENNIFER DR.
Address 6225 DORCHESTER WAY
City-State-Zip: VERO BEACH FL 32966

Title CFO
Name PELAEZ, CHRISTIAN
Address 2455 ST. LUCIE AVENUE
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name TRAWICK, WILLIE PEARL
Address 3785 47TH STREET
City-State-Zip: VERO BEACH FL 32967

Title CEO
Name DAVIS-GREEN, ANGELA
Address 2455 ST. LUCIE AVENUE
City-State-Zip: VERO BEACH FL 32960