

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000006786

**Entity Name:** INDIANTOWN COMMUNITY OUTREACH, INC.

**Current Principal Place of Business:**

15161 SW 169TH AVE  
INDIANTOWN, FL 34956

**Current Mailing Address:**

P.O.BOX 1696  
INDIANTOWN, FL 34956 US

**FEI Number: 30-0033778**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

CLARKE, JACQUELINE L  
14971 S.W. INDIAN AVENUE  
INDIANTOWN, FL 34956 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            CEO  
Name            CLARKE, JACQUELINE L  
Address        14971 S.W. INDIAN AVENUE  
City-State-Zip: INDIANTOWN FL 34956

Title            DT  
Name            PARKS, PARDORA  
Address        907 EAST NINITH STREET  
City-State-Zip: STUART FL 34994

Title            SD  
Name            PARKS, PANDORA  
Address        907 EAST NINTH STREET  
City-State-Zip: STUART FL 34994

Title            PD  
Name            MACAVOY, SONIA  
Address        1526 SE ROYAL GREEN CIR. APT  
                  #102  
City-State-Zip: PORT SAINT LUCIE FL 34952

Title            DIRECTOR-LEGAL COUNCIL  
Name            HAMILTON, VEVERLY  
Address        623 SE LAKOTA LANE  
City-State-Zip: PORT. ST. LUICE FL 34895

*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: JACQUELINE CLARKE**

**CEO**

**04/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date