

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000003784

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Entity Name:** BETY N. GILES CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

46 N. WASHINGTON BLVD. NO. 27  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

46 N. WASHINGTON BLVD. NO. 27  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 65-1107943

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWING III, GEORGE  
46 N. WASHINGTON BLVD  
27  
SARASOTA, FL 34236 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** PTD  
**Name:** BROWNING, GEORGE III  
**Address:** 46 N. WASHINGTON BLVD., STE. 27  
**City-St-Zip:** SARASOTA, FL 34236

**Title:** SD  
**Name:** BROWNING, ANNA HARDEE  
**Address:** 1705 SIESTA DR.  
**City-St-Zip:** SARASOTA, FL 34239

**Title:** D  
**Name:** BROWNING, SALLY  
**Address:** 5132 BEECHMONT AVE  
**City-St-Zip:** SARASOTA, FL 34234

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:** GEORGE BROWNING III

DIR

02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date