

**N06000008858**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATION  
2016 JUL 20 PM 2:09

JUL 28 2016  
C LEWIS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Brooks DeBartolo Charities, Inc.

**DOCUMENT NUMBER:** N06000008858

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Aundrekia Williams

(Name of Contact Person)

Brooks DeBartolo Charities, Inc. DBA Brooks DeBartolo Collegiate High School

(Firm/ Company)

10948 N. Central Avenue

(Address)

Tampa, FL 33612

(City/ State and Zip Code)

Aundrekia.Williams@bdchs.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aundrekia Williams

813

971-5600

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Brooks DeBartolo Charities, Inc.

2016 JUL 20 PM 2:09

(Name of Corporation as currently filed with the Florida Dept. of State)

N06000008858

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

*(Principal office address **MUST BE A STREET ADDRESS**)*

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

*(Florida street address)*

*(City)*

*, Florida*

*(Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

*Signature of New Registered Agent, if changing*

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>C</u>	<u>David Mallitz</u>	<u>16211 Talavera de Avila</u> <u>Tampa, FL 33613</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Geza Henni</u>	<u>28 South Treasure Drive</u> <u>Tampa, FL 33602</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Derrick Brooks</u>	<u>3750 Gunn Highway, Suite 109</u> <u>Tampa, FL 33618</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Mercedes Gonzalez-Hale</u>	<u>9167 Highland Ridge Way</u> <u>Tampa, FL 33647</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VC</u>	<u>Dr. Cynthia Vasquez</u>	<u>2803 Graphite Court</u> <u>Valrico, FL 33594</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>Lisa DeBartolo</u>	<u>15436 N. Florida Ave Suite 200</u> <u>Tampa, FL 33613</u>

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*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

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<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Nicole Debartolo</u>	<u>15436 N. Florida Avenue Suite 200</u> <u>Tampa, FL 33613</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Joseph Affronti</u>	<u>922 N. Riverhills Drive</u> <u>Temple Terrace, FL 33617</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Chad Chronister</u>	<u>5138 W. Longfellow Avenue</u> <u>Tampa, FL 33629</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>James Henning</u>	<u>1002 S. Harbor Island #1112</u> <u>Tampa, FL 33602</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Richard Lozada</u>	<u>6015 Pratt Street</u> <u>Tampa, FL 33647</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Norma Matassini</u>	<u>201 S. Hubert Avenue</u> <u>Tampa, FL 33609</u>

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

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<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Dr. Delia Palermo</u>	<u>1602 Magdalene Manor Dr.</u> <u>Tampa, FL 33613</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Valerie Panou</u>	<u>15436 N Florida Avenue Ste 200</u> <u>Tampa, FL 33613</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Bonita Pulido</u>	<u>2915 W. Fern Street</u> <u>Tampa, FL 33614</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>Dr. Bonnie Salazar</u>	<u>6607 Heatherton Court</u> <u>Tampa, FL 33617</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Parent Representative PR</u>	<u>Maryanne Funai</u>	<u>16416 Burniston Drive</u> <u>Tampa, FL 33647</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove		<u>Dan Allen</u>	<u>17531 Stinchar Dr</u> <u>Land O Lakes, FL 34638</u>

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

N/A

N/A

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

N/A

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

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**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

July 13, 2016

Dated \_\_\_\_\_

Signature \_\_\_\_\_



(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Kristine Bennett

\_\_\_\_\_  
(Typed or printed name of person signing)

Principal

\_\_\_\_\_  
(Title of person signing)