

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010770

**Entity Name:** HERBERT G. BROWN FAMILY FOUNDATION, INC.

**FILED**  
**Jan 25, 2023**  
**Secretary of State**  
**1003709196CC**

**Current Principal Place of Business:**

635 COURT STREET  
SUITE 120  
CLEARWATER, FL 33756

**Current Mailing Address:**

635 COURT STREET  
SUITE 120  
CLEARWATER, FL 33756

**FEI Number:** 20-0519264

**Certificate of Status Desired:** No

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

BROWN, JARED D  
635 COURT STREET  
SUITE 120  
CLEARWATER, FL 33756 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 VP, DIRECTOR  
Name BROWN, DIANE F  
Address 1114 MANDALAY POINT  
City-State-Zip: CLEARWATER FL 33767

Title PRESIDENT, SECRETARY,  
TREASURER, DIRECTOR  
Name BROWN, JARED D  
Address 635 COURT STREET  
SUITE 120  
City-State-Zip: CLEARWATER FL 33756

Title DIRECTOR  
Name ARNOLD, DEBORAH B  
Address 311 PARK PLACE BLVD.  
SUITE 600  
City-State-Zip: CLEARWATER FL 33759-4925

*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:** JARED D. BROWN

**PRESIDENT**

**01/25/2023**

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

\_\_\_\_\_  
Date