

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008858

Entity Name: BROOKS DEBARTOLO CHARITIES, INC.**Current Principal Place of Business:**10948 N. CENTRAL AVENUE
TAMPA, FL 33612**Current Mailing Address:**10948 N. CENTRAL AVENUE
TAMPA, FL 33612 US**FEI Number:** 20-5767786**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BROOKS, DERRICK P
10948 N. CENTRAL AVENUE
TAMPA, FL 33612 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	D
Name	HALE, MERCEDES G
Address	9167 HIGHLAND RIDGE WAY
City-State-Zip:	TAMPA FL 33618

Title	TREASURER
Name	VASQUEZ, CYNTHIA DR
Address	2803 GRAPHITE CT
City-State-Zip:	VALRICO FL 33594

Title	D
Name	LOZADA, RICHARD
Address	6015 PRATT ST
City-State-Zip:	TAMPA FL 33647

Title	SECRETARY
Name	ROBERTS, JOAN
Address	6215 SAVANNAH BREEZE COURT APT10
City-State-Zip:	TAMPA FL 33625

Title	CHAIRMAN
Name	MATASSINI, NORMA
Address	201 S. HUBERT AVENUE
City-State-Zip:	TAMPA FL 33609

Title	VC
Name	BROOKS, DERRICK
Address	3750 GUNN HIGHWAY - STE. 109
City-State-Zip:	TAMPA FL 33618

Title	DIRECTOR
Name	BRAGDON, JUDY
Address	10021 CYPRESS SHADOW AVE
City-State-Zip:	TAMPA FL 33647

Title	DIRECTOR
Name	MORAGNE, ALTELIO
Address	4627 WHISPERING WIND AVE
City-State-Zip:	TAMPA FL 33614

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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: DERRICK BROOKS**VICE CHAIRMAN****01/16/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BROWNE, JOHN
Address	10443 CANARY ISLE DR
City-State-Zip:	TAMPA FL 33647