

2021 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:** No**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 CHAIRMAN
Name VASQUEZ, CYNTHIA DR
Address 2803 GRAPHITE CT
City-State-Zip: VALRICO FL 33594

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

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

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

Title DIRECTOR
Name BERGER, DAVID
Address 4305 MIDDLE LAKE DRIVE
City-State-Zip: TAMPA FL 33624

Title DIRECTOR
Name KAMIS, JEFFREY
Address 3114 W PRICE AVENUE
City-State-Zip: TAMPA FL 33611

Title DIRECTOR
Name SELIG, CHARYN
Address 6215 SAVANNAH BREEZE COURT
APT 102
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name SPERRY, TIFFANY F
Address 6318 JACQUELINE ARBOR DR
City-State-Zip: TAMPA FL 33617

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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

VC

04/15/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DEBRA, STULTZ
Address 869 SYMPHONY ISLES BLVD
City-State-Zip: APOLLO BEACH FL 33572

Title DIRECTOR
Name FINK, CAROLYN
Address 11328 CARROLLWOOD DR
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name MARCET, HENRY
Address 216 N LINCOLN AVE
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name BAKER, COLLETTE
Address 4106 SILVERMOON DRIVE
City-State-Zip: PLANT CITY FL 33566

Title DIRECTOR
Name GAMSON, MICHAEL
Address 12008 TREVINO PL
City-State-Zip: TAMPA FL 33624