### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008858

Entity Name: BROOKS DEBARTOLO CHARITIES, INC.

**FILED** Apr 12, 2022 **Secretary of State** 5991429640CC

## **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** Title VC

BROOKS, DERRICK MATASSINI, NORMA Name Name

Address 3750 GUNN HIGHWAY Address 3301 BAYSHORE BLVD STE 109

#2307

City-State-Zip: TAMPA FL 33618 City-State-Zip: TAMPA FL 33629

Title **SECRETARY** Title **TREASURER** Name BRAGDON, JUDY Name BROWNE, JOHN

10021 CYPRESS SHADOW AVE 10443 CANARY ISLE DR Address Address

City-State-Zip: TAMPA FL 33647 TAMPA FL 33647 City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR** 

Name SELIG. CHARYN KAMIS, JEFFREY Name

Address 11738 LIPSEY ROAD Address 3042 CALVANO DRIVE

City-State-Zip: TAMPA FL 33618 City-State-Zip: LAND O'LAKES FL 34639

Title DIRECTOR Title DIRECTOR

Name DEBRA, STULTZ Name SPERRY, TIFFANY F

Address 869 SYMPHONY ISLES BLVD Address 6318 JACQUELINE ARBOR DR

APOLLO BEACH FL 33572 City-State-Zip: City-State-Zip: TAMPA FL 33617

# Continues on page 2

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.

04/12/2022 SIGNATURE: DERRICK BROOKS **CHAIR** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name BAKER, COLLETTE Name FINK, CAROLYN

Address 4106 SILVERMOON DRIVE Address 11328 CARROLLWOOD DR

City-State-Zip: PLANT CITY FL 33566 City-State-Zip: TAMPA FL 33618

Title DIRECTOR Title DIRECTOR

Name HODGENS, JENNA Name RILEY RABON, DEIAH

Address 6323 COUNTRY CLUB RD Address 20938 LAKE VIENNA DRIVE

City-State-Zip: WESLEY CHAPEL FL 33544 City-State-Zip: LAND O'LAKES FL 34639