

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709062

1. Entity Name

BELLEGLADE LODGE #1716 BENEVOLENT AND PROTECTIVE

Principal Place of Business

300 S.E. AVE. E  
BELLE GLADE FL 33430

Mailing Address

P O BOX 733  
BELLE GLADE FLA 33430-0733  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0567384

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SEIBERT, CARL  
300 S.E. AVE. E.  
BELLE GLADE FL 33430

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE S ☐ Delete  
NAME SEIBERT, CARL  
STREET ADDRESS 124 SE 6TH ST N  
CITY-ST-ZIP BELLE GLADE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME ORSENIGO, JOE  
STREET ADDRESS 101 SE 7TH ST  
CITY-ST-ZIP BELLE GLADE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME JOHNSON, KATHY  
STREET ADDRESS 317 NE 3RD ST  
CITY-ST-ZIP BELLE GLADE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME TOWELL, RAY  
STREET ADDRESS 956 NW 4TH ST  
CITY-ST-ZIP BELLE GLADE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME DEXTER, VERNON  
STREET ADDRESS 333 SE AVE I  
CITY-ST-ZIP BELLE GLADE FL

TITLE ☐ Change ☒ Addition  
NAME CHARLES WILKINSON  
STREET ADDRESS 300 SE AVE. E  
CITY-ST-ZIP Belle Glade, FL 33430

TITLE D ☐ Delete  
NAME JOHNSON, STEVE  
STREET ADDRESS 317 NE 3 ST  
CITY-ST-ZIP BELLE GLADE FL 33430

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE RECORDED Secy.

Date

Daytime Phone #

FILED  
Apr 27, 2000 8:00 am  
Secretary of State

04-27-2000 90026 015 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)