

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709552

1. Entity Name

SCOTTISH RITE TEMPLE ASSOCIATION

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90039 008 ****61.25

Principal Place of Business

Mailing Address

5500 MEMORIAL HIGHWAY
TAMPA FL 33634

5500 MEMORIAL HIGHWAY
TAMPA FLA 33634-7336

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7187289

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

KIRKPATRICK, ROBERT G
5500 MEMORIAL HWY
TAMPA FL 33634

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 P ☒ Delete
NAME BANKHEAD, JOHN M JR
STREET ADDRESS 13310 MORAN DR
CITY-ST-ZIP TAMPA FL 33618

TITLE P ☐ Change ☒ Addition
NAME CLARK, JR., VERNON T
STREET ADDRESS 7402 SPARKMAN
CITY-ST-ZIP TAMPA, FLORIDA 33616

TITLE T ☐ Delete
NAME LANIER, ASHLEY T.
STREET ADDRESS 509 ROLLINGVIEW PL.
CITY-ST-ZIP TEMPLE TERRACE FL

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

TITLE S ☐ Delete
NAME KIRKPATRICK, ROBERT G
STREET ADDRESS 1846 PENNWOOD CIR W
CITY-ST-ZIP CLEARWATER FL

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

TITLE D ☒ Delete
NAME CARLETON, PATRICK P L
STREET ADDRESS 1155 N COURTENAY PKWY #C 51
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE D ☐ Change ☒ Addition
NAME KALISZ, RONALD S
STREET ADDRESS 406 CHRISTOPHER CT. S.E.
CITY-ST-ZIP WINTER HAVEN, FLORIDA 33884-1573

TITLE D ☒ Delete
NAME BEJAR, J M
STREET ADDRESS 1456 KEENE RD S
CITY-ST-ZIP CLEARWATER FL 34616

TITLE D ☐ Change ☒ Addition
NAME VAN TRUMP, JR., RODERICK
STREET ADDRESS 4616 BAY CREST DRIVE
CITY-ST-ZIP TAMPA, FLORIDA 33615-4902

TITLE D ☒ Delete
NAME STROM, J F
STREET ADDRESS 233 34TH AVE N
CITY-ST-ZIP ST PETERSBURG FL 33704

TITLE D ☐ Change ☒ Addition
NAME BLATE, DAVID A
STREET ADDRESS 2300 AVE E NW
CITY-ST-ZIP WINTERHAVEN, FLORIDA 33880

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert G. Kirkpatrick 2/1/2000

Date

813-886-0578

Daytime Phone #

CR2E037 (9/99)