

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 04, 2004 8:00 am**  
**Secretary of State**

02-04-2004 90030 035 \*\*\*\*61.25

**DOCUMENT # N43958**

1. Entity Name

THE GLADES HISTORICAL SOCIETY, INC.



Principal Place of Business

530 SOUTH MAIN STREET  
BELLE GLADE FL 33430  
US

Mailing Address

101 S.E. 7TH STREET NORTH  
BELLE GLADE FL 33430  
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

59-1690097

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

ORSENIGO, JOSEPH R DR.  
101 S.E. 7TH STREET NORTH  
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. I am familiar with, and accept the obligations of registered agent.

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**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME ORSENIGO, JOSEPH R DR  
STREET ADDRESS 101 S.E. 7TH STREET NORTH  
CITY-ST-ZIP BELLE GLADE FL 33430

TITLE SD ☐ Delete  
NAME IRVIN, RUTH S  
STREET ADDRESS 901 N.W. 1ST STREET  
CITY-ST-ZIP BELLE GLADE FL 33430

TITLE TD ☐ Delete  
NAME SWAGER, GLORIA  
STREET ADDRESS 301 S.E. 7TH STREET NORTH  
CITY-ST-ZIP BELLE GLADE FL 33430

TITLE D ☒ Delete  
NAME MARKHAM, BRANDON  
STREET ADDRESS 1149 STILLWELL ROAD  
CITY-ST-ZIP BELLE GLADE FL 33430

TITLE D ☐ Delete  
NAME STEIN, STEWART  
STREET ADDRESS 1625 WEDGEWORTH ROAD  
CITY-ST-ZIP BELLE GLADE FL 33430

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition  
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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: *Joseph R Orsenigo* PRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

30 JAN 04

561 / 996-5798

Date

Daytime Phone #