

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004897

Entity Name: RUSSELL BAYOU HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**908 GARDENGATE CIRCLE
PENSACOLA, FL 32504**Current Mailing Address:**908 GARDENGATE CIRCLE
PENSACOLA, FL 32504 US**FEI Number:** 54-2098635**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ETHERIDGE, RAY O
908 GARDENGATE CIRCLE
PENSACOLA, FL 32504 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	PRESIDENT
Name	WINKELMAN, JACKIE
Address	16277 NARWHAL DRIVE
City-State-Zip:	PENSACOLA FL 32507
Title	DIRECTOR
Name	BURAND, STEVE
Address	16286 YGNACIO SERRA DRIVE
City-State-Zip:	PENSACOLA FL 32507
Title	SECRETARY
Name	MCCASKILL, JEFF
Address	16245 INNERARITY POINT ROAD
City-State-Zip:	PENSACOLA FL 32507
Title	DIRECTOR
Name	WINANS, ERIC
Address	16268 YGNACIO SERRA DRIVE
City-State-Zip:	PENSACOLA FL 32507

Title	TREASURER
Name	FERGUSON, DEE
Address	16280 YGNACIO SERRA DRIVE
City-State-Zip:	PENSACOLA FL 32507
Title	DIRECTOR
Name	SPEIR, HAROLD
Address	30 LAUDERDALE STREET
City-State-Zip:	SELMA AL 36701
Title	VP
Name	SANDUSKY, HOWARD
Address	16231 TARPON DRIVE
City-State-Zip:	PENSACOLA FL 32507
Title	DIRECTOR
Name	JOHNSON, KEITH
Address	913 CATSKILL LANE
City-State-Zip:	PENSACOLA FL 32507

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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: JACKIE WINKELMAN**PRESIDENT****04/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name THORNTON, GEORGE
Address P.O. BOX 630
City-State-Zip: EDGEFIELD SC 29824

Title DIRECTOR
Name THORNTON, GEORGE
Address P.O. BOX 630
City-State-Zip: EDGEFIELD SC 29824