

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 20, 2019
Secretary of State
4283305513CC

Entity Name: SAMUEL I. RUSSELL FOUNDATION, INC.

Current Principal Place of Business:

312 ROSERY ROAD
BELLEAIR, FL 33756

Current Mailing Address:

312 ROSERY ROAD
BELLEAIR, FL 33756

FEI Number: 45-5310467

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUSSELL, SAMUEL I, JR
312 ROSERY ROAD
BELLEAIR, FL 33756 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: SAMUEL I. RUSSELL, JR.

04/20/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	RUSSELL, SAMUEL I. JR.
Address	312 ROSERY ROAD
City-State-Zip:	BELLEAIR FL 33756
Title	DIRECTOR
Name	SHAFFER, MATTHEW G. CGCS
Address	520 WEST MAINE STREET
City-State-Zip:	BOALSBURG PA 16827
Title	SECRETARY, TREASURER
Name	LINDLEY , BRIAN
Address	3221 SEAVIEW AVENUE
City-State-Zip:	CORONA DEL MAR CA 92625
Title	DIRECTOR
Name	TYRRELL , CURTIS CGCS, MG
Address	DIRECTOR GOLF COURSE OPERATIONS BONITA BAY CLUB 26660 COUNTRY CLUB DRIVE
City-State-Zip:	BONITA SPRINGS FL 34134

Title	DIRECTOR
Name	KUHNS, MARK D. CGCS
Address	DIRECTOR OF GROUNDS BALUSROL GOLF CLUB 201 SHUNPIKE ROAD
City-State-Zip:	SPRINGFIELD NJ 07081
Title	VP
Name	TAYLOR, NORMAN F.
Address	TAYLOR AND ASSOCIATES 425 W BROADWAY SUITE 220
City-State-Zip:	GLENDALE CA 91204
Title	DIRECTOR
Name	CHRISTIAN, RICHARD E. JR., CGCS
Address	GOLF COURSE SUPERINTENDENT PINE VALLEY GOLF CLUB EAST ATLANTIC AVENUE
City-State-Zip:	PINE VALLEY NJ 08021
Title	DIRECTOR
Name	TAYLOR, ANTHONY CGCS
Address	88 SOI LASALLE 58 BANGNA TAI 11TH FLOOR A.P. NARANINTR BUIDING
City-State-Zip:	BANGA BANGKOK 10260

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.

SIGNATURE: SAMUEL I RUSSELL, JR

PRESIDENT

04/20/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STRAKA, JASON
Address 6940 RAYMOND DRIVE
City-State-Zip: DUBLIN OH 43017