

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000004807

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: Yes

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.

04/15/2017

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 KUHNS, MARK D. CGCS
Address DIRECTOR OF GROUNDS
 BALTUSROL GOLF CLUB 201
 SHUNPIKE ROAD
City-State-Zip: SPRINGFIELD NJ 07081

Title DIRECTOR
Name SHAFFER, MATTHEW G. CGCS
Address DIRECTOR OF GOLF COURSE
 OPERATIONS
 MERION GOLF CLUB 450 ARDMORE
 AVENUE
City-State-Zip: ARDMORE PA 19003

Title VP
Name TAYLOR, NORMAN F.
Address TAYLOR AND ASSOCIATES
 425 W BROADWAY SUITE 220
City-State-Zip: GLENDALE CA 91204

Title SECRETARY, TREASURER
Name LINDLEY , BRIAN
Address 3221 SEAVIEW AVENUE
City-State-Zip: CORONA DEL MAR CA 92625

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 TYRRELL , CURTIS CGCS, MG
Address DIRECTOR GOLF COURSE
 OPERATIONS
 MEDINAH CC 6N001 MEDINAH ROAD
City-State-Zip: MEDINAH IL 60157

Title DIRECTOR
Name TAYLOR, ANTHONY CGCS
Address 22/581 SRINAKARIN ROAD
City-State-Zip: BANGPLEE SAMUTH PRAKARN
 10450

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

04/15/2017

Electronic Signature of Signing Officer/Director Detail

Date