2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00400

FILED Feb 02, 2006 Secretary of State

Entity Name: VILLAGE OF PINE RUN UTILITY CORPORATION

Current Principal Place of Business: New Principal Place of Business:

100 LIMEWOOD PLACE 100 LIMEWOOD PLACE

ORMOND BCH., FL 32174 US ORMOND BEACH, FL 32174 US

Current Mailing Address: New Mailing Address:

100 LIMEWOOD PLACE 100 LIMEWOOD PLACE

ORMOND BCH., FL 32174 US ORMOND BEACH, FL 32174 US

FEI Number: 59-2443262 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SCHMIDT, TOM SCHMIDT, TOM

220-3-1 LÉMON TREE LANE
ORMOND BCH, FL 32174 US
220-3 LEMON TREE LANE
ORMOND BEACH, FL 32174 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: 02/02/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VP () Delete Title: PRES (X) Change () Addition

 Name:
 STUMPF, ERIC
 Name:
 SCHMIDT, TOM

 Address:
 170-8 LIMEWOOD PLACE
 Address:
 220-3 LEMON TREE LANE

 City-St-Zip:
 ORMOND BEACH, FL 32174
 City-St-Zip:
 ORMOND BEACH, FL 32174

Title: PRES () Delete Title: VP (X) Change () Addition Name: SCHMIDT, TOM Name: HARRIS, MONA

Address: 220-3 LEMON TREE LANE Address: 140-2 LIMEWOOD PLACE
City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174

Title: SEC () Delete Title: TRES (X) Change () Addition

Name: HARRIS, MONA Name: ANDY, RITTER

Address: 140-2 LIMEWOOD PLACE Address: 201-8 ORANGE GROVE DRIVE City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174

Title: TRES () Delete Title: DIR (X) Change () Addition

 Name:
 RITTER, ANDY
 Name:
 LAWSON, II, CLYDE

 Address:
 201-8 ORANGE GROVE DR.
 Address:
 110-2 LIMEWOOD PLACE

 City-St-Zip:
 ORMOND BEACH, FL 32174
 City-St-Zip:
 ORMOND BEACH, FL 32174

Title: DIR (X) Delete Title: () Change () Addition

 Name:
 O'BRIAN, BARBARA
 Name:

 Address:
 250-4 ORANGE GROVE DR.
 Address:

 City-St-Zip:
 ORMOND BEACH, FL 32174
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TOM SCHMIDT PRES 02/02/2006