

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00400

Entity Name: VILLAGE OF PINE RUN UTILITY CORPORATION**Current Principal Place of Business:**100 LIMWOOD PLACE
ORMOND BEACH, FL 32174**Current Mailing Address:**785 W. GRANADA BLVD, SUITE 5
ORMOND BEACH, FL 32174 US**FEI Number:** 59-2443262**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SOUTHERN STATES MANAGEMENT GROUP, INC.
785 W. GRANADA BLVD, SUITE 5
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:** JEFFREY ANNON

04/22/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	CUMMINGS, CHRISTINE
Address	785 W. GRANADA BLVD, SUITE 5
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIRECTOR
Name	GREGOREK, NAZNIN
Address	785 W. GRANADA BLVD, SUITE 5
City-State-Zip:	ORMOND BEACH FL 32174

Title	VP
Name	CHARLA, ANNALENA
Address	785 W. GRANADA BLVD, SUITE 5
City-State-Zip:	ORMOND BEACH FL 32174

Title	TREASURER
Name	PURDY, KENDALL
Address	785 W. GRANADA BLVD, SUITE 5
City-State-Zip:	ORMOND BEACH FL 32174

Title	SECRETARY
Name	LANDSMAN, FRIEDA
Address	785 W. GRANADA BLVD, SUITE 5
City-State-Zip:	ORMOND BEACH FL 32174

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: CHRISTINE CUMMINGS

PRESIDENT

04/22/2025

Electronic Signature of Signing Officer/Director Detail

Date