

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000012142

**Entity Name:** PINE CASTLE CHRISTIAN ACADEMY, INC.

**Current Principal Place of Business:**

7101 LAKE ELLENOR DR  
ORLANDO, FL 32809

**Current Mailing Address:**

7101 LAKE ELLENOR DR  
ORLANDO, FL 32809

**FEI Number:** 27-1540677

**Certificate of Status Desired:** Yes

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

KUCK, TIM  
7101 LAKE ELLENOR DRIVE  
ORLANDO, FL 32809 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:** TIM KUCK

03/06/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title OFFICER  
Name KUCK, TIM  
Address 7101 LAKE ELLENOR DR  
City-State-Zip: ORLANDO FL 32809

Title SECRETARY  
Name SCOTT, JULIE  
Address 7101 LAKE ELLENOR DR  
City-State-Zip: ORLANDO FL 32809

Title CHAIRMAN, TREASURER  
Name HASTINGS, JANET BLAIR  
Address 7101 LAKE ELLENOR DRIVE  
City-State-Zip: ORLANDO FL 32809

Title OFFICER  
Name KUCK, MARIE  
Address 7101 LAKE ELLENOR DR  
City-State-Zip: ORLANDO FL 32809

Title HEAD OF SCHOOL  
Name PACHECO, MICHELLE  
Address 7101 LAKE ELLENOR DRIVE  
City-State-Zip: ORLANDO FL 32809

Title OFFICER  
Name COOPER, CATHY  
Address 7101 LAKE ELLENOR DR  
City-State-Zip: ORLANDO FL 32809

Title OFFICER  
Name MANNING, LATOYA  
Address 7101 LAKE ELLENOR DR  
City-State-Zip: ORLANDO FL 32809

Title OFFICER  
Name PEREZ, DALLY  
Address 7101 LAKE ELLENOR DR  
City-State-Zip: ORLANDO FL 32809

**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:** JANET BLAIR HASTINGS

CHAIRMAN

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title OFFICER  
Name DELVALLE, YANIRA  
Address 7101 LAKE ELLENOR DR  
City-State-Zip: ORLANDO FL 32809