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CLASS "C"

WATER AND/OR WASTEWATER UTILITIES

(Gross Revenue of Less Than \$200,000 Each)

ANNUAL REPORT

WS895-06-AR
Pine Ridge Management Corporation
P. O. Box 307
Lake Placid, FL 33862-0307

Certificate Number(s)

Submitted To The

STATE OF FLORIDA



PUBLIC SERVICE COMMISSION

FOR THE

YEAR ENDED DECEMBER 31, 2006

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FINANCIAL SECTION

Pine Ridge Management
Corporation
PO Box 307
Lake Placid, FL 33862

REPORT OF

(EXACT NAME OF UTILITY)

41 Pine Aire Circle
Lake Placid, FL 33852 Highlands
Street Address County

Mailing Address

Telephone Number 863-699-1582

Date Utility First Organized unknown
existing when purchased 16 Jan 1990

Fax Number 863-699-1582
(call first)

E-mail Address vl.gadsden@earthlink.net

Sunshine State One-Call of Florida, Inc. Member No. NA

Check the business entity of the utility as filed with the Internal Revenue Service:

☐ Individual ☐ Sub Chapter S Corporation ☒ 1120 Corporation ☐ Partnership

Name, Address and Phone where records are located: Virginia L. Gadsden
41 Pine Aire Circle, Lake Placid, FL 33852 863-699-1582

Name of subdivisions where services are provided: Pine Ridge
Okeechobee, FL
(Okeechobee County)

CONTACTS

Name	Title	Principal Business Address	Salary Charged Utility
Person to send correspondence: Virginia L. Gadsden	President	PO Box 307 Lake Placid, FL 33862	
Person who prepared this report: Virginia L. Gadsden			
Officers and Managers: None	None		\$ - 0 -
			\$
			\$
			\$
			\$
			\$

Report every corporation or person owning or holding directly or indirectly 5 percent or more of the voting securities of the reporting utility:

Name	Percent Ownership in Utility	Principal Business Address	Salary Charged Utility
None	None	None	\$ - 0 -
			\$
			\$
			\$
			\$
			\$
			\$
			\$

Pine Ridge Management
Corporation
PO Box 307
Lake Placid, FL 33862

UTILITY NAME: _____

YEAR OF REPORT
DECEMBER 31, 2006

INCOME STATEMENT

Account Name	Ref. Page	Water	Wastewater	Other	Total Company
Gross Revenue:					
Residential _____		\$ 7,280.00	\$ 57,384.95	\$ 84,254.62	\$ 149,419.57
Commercial _____		490.00	1,470.00	0	1,960.00
Industrial _____					
Multiple Family _____		10,269.45	0	0	10,269.45
Guaranteed Revenues _____					
Other (Specify) _____					
Total Gross Revenue _____		\$ 18,039.45	\$ 59,354.95	\$ 84,254.62	\$ 161,649.02
Operation Expense (Must tie to pages W-3 and S-3)	W-3 S-3	\$ 35,479.36	\$ 63,431.57	\$ 15,548.82	\$ 114,459.75
Depreciation Expense _____	F-5	1,330.57	1,330.57	35,970.86	38,632.00
CIAC Amortization Expense _____	F-8	0	0	0	0
Taxes Other Than Income _____	F-7	1,657.32	5,870.20	12,133.75	19,661.27
Income Taxes _____	F-7				
Total Operating Expense		\$ 38,467.25	70,632.34	63,653.43	\$ 172,753.02
Net Operating Income (Loss)		\$ (20,427.80)	\$ (11,277.39)	\$ 20,601.19	\$ (11,104.00)
Other Income:					
Nonutility Income _____		\$ 0	\$ 0	\$ 0	\$ 0

Other Deductions:					
Miscellaneous Nonutility Expenses _____		\$ 0	\$ 0	\$ 0	\$ 0
Interest Expense _____					

Net Income (Loss)		\$ (20,427.80)	\$ (11,277.39)	\$ 20,601.19	\$ (11,104.00)

Pine Ridge Management

Corporation

UTILITY NAME: _____

PO Box 307

Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

COMPARATIVE BALANCE SHEET

ACCOUNT NAME	Reference Page	Current Year	Previous Year
Assets:			
Utility Plant in Service (101-105) _____	F-5,W-1,S-1	\$ <u>127,552.28</u>	\$ <u>127,552.28</u>
Accumulated Depreciation and Amortization (108) _____	F-5,W-2,S-2	<u>22,642.72</u>	<u>19,981.58</u>
Net Utility Plant _____		\$ <u>104,909.56</u>	\$ <u>107,570.70</u>
Cash _____		_____	_____
Customer Accounts Receivable (141) _____		_____	_____
Other Assets (Specify): _____		_____	_____
<i>Non-Utility Assets (net of accumulated depreciation)</i>		<u>318,792.44</u>	<u>359,763.30</u>
Total Assets _____		\$ <u>423,702.00</u>	\$ <u>467,334.00</u>
Liabilities and Capital:			
Common Stock Issued (201) _____	F-6	_____	_____
Preferred Stock Issued (204) _____	F-6	_____	_____
Other Paid in Capital (211) _____		_____	_____
Retained Earnings (215) _____	F-6	<u>331,115.30</u>	<u>369,777.95</u>
Proprietary Capital (Proprietary and Partnership only) (218) _____	F-6	_____	_____
Total Capital _____		\$ _____	\$ _____
Long Term Debt (224) _____	F-6	\$ <u>92,586.70</u>	\$ <u>97,536.05</u>
Accounts Payable (231) _____		_____	_____
Notes Payable (232) _____		_____	_____
Customer Deposits (235) _____		_____	_____
Accrued Taxes (236) _____		_____	_____
Other Liabilities (Specify) _____		_____	_____
Advances for Construction _____		_____	_____
Contributions in Aid of Construction - Net (271-272) _____	F-8	_____	_____
Total Liabilities and Capital _____		\$ <u>423,702.00</u>	\$ <u>467,334.00</u>

Pine Ridge Management
Corporation
PO Box 307
Lake Placid, FL 33862

UTILITY NAME: _____

YEAR OF REPORT
DECEMBER 31, 2006

GROSS UTILITY PLANT

Plant Accounts: (101 - 107) inclusive	Water	Wastewater	Plant other than Reporting Systems	Total
Utility Plant in Service (101)	\$ 63,776.14	\$ 63,776.14	\$ 473,302.72	\$ 600,855.00
Construction Work in Progress (105) _____	_____	_____	_____	_____
Other (Specify) _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Utility Plant _____	\$ 63,776.14	\$ 63,776.14	\$ 473,302.72	\$ 600,855.00

ACCUMULATED DEPRECIATION (A/D) AND AMORTIZATION OF UTILITY PLANT

Account 108	Water	Wastewater	Other than Reporting Systems	Total
Balance First of Year _____	\$ 9,990.79	\$ 9,990.79	\$ 113,539.42	\$ 133,521.00
<u>Add Credits During Year:</u>				
Accruals charged to depreciation account _____	\$ 1,330.57	\$ 1,330.59	\$ 35,970.86	\$ 38,632.00
Salvage _____	_____	_____	_____	_____
Other Credits (specify) _____	_____	_____	_____	_____
Total Credits _____	\$ 1,330.57	\$ 1,330.57	\$ 35,970.86	\$ 38,632.00
<u>Deduct Debits During Year:</u>				
Book cost of plant retired _____	\$ _____	\$ _____	\$ _____	\$ _____
Cost of removal _____	_____	_____	_____	_____
Other debits (specify) _____	_____	_____	_____	_____
Total Debits _____	\$ _____	\$ _____	\$ _____	\$ _____
Balance End of Year _____	\$ 11,321.36	\$ 11,321.36	\$ 149,510.28	\$ 172,153.00

Pine Ridge Management
Corporation

UTILITY NAME: _____

PO Box 307
Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

CAPITAL STOCK (201 - 204)

	Common Stock	Preferred Stock
Par or stated value per share _____	0	0
Shares authorized _____	1,000	0
Shares issued and outstanding _____	1,000	0
Total par value of stock issued _____	0	0
Dividends declared per share for year _____	0	0

RETAINED EARNINGS (215)

	Appropriated	Un- Appropriated
Balance first of year _____	\$ 0	\$ 369,777.95
Changes during the year (Specify): Results of 2006 Operations		(38,662.65)
Balance end of year _____	\$ 0	\$ 331,115.30

PROPRIETARY CAPITAL (218)

	Proprietor Or Partner	Partner
Balance first of year _____	\$ 0	\$ 0
Changes during the year (Specify):		
Balance end of year _____	\$ 0	\$ 0

LONG TERM DEBT (224)

Description of Obligation (Including Date of Issue and Date of Maturity):	Interest		Principal per Balance Sheet Date
	Rate	# of Pymts	
Real Estate mortgage issued 4-15-05 matures 4-15-10	7.75%	60	\$ 92,586.70
Total _____			\$ _____

UTILITY NAME: Pine Ridge Management Corporation
PO Box 307
Lake Placid, FL 33862 TAX EXPENSE

YEAR OF REPORT
 DECEMBER 31, 2006

(a)	Water (b)	Wastewater (c)	Other (d)	Total (e)
Income Taxes:				
Federal income tax _____	\$ _____	\$ _____	\$ _____	\$ _____
State income Tax _____	_____	_____	_____	_____
Taxes Other Than Income:				
State ad valorem tax _____	_____	_____	_____	_____
Local property tax _____	<u>811.87</u>	<u>3,158.95</u>	<u>9,476.86</u>	<u>13,447.68</u>
Regulatory assessment fee _____	<u>845.45</u>	<u>2,711.25</u>	_____	<u>3,556.70</u>
Other (Specify) <u>Miscellaneous</u> _____	_____	_____	<u>2,656.89</u>	<u>2,656.89</u>
Total Tax Expense _____	\$ <u>1,657.32</u>	\$ <u>5,870.20</u>	\$ <u>12,133.75</u>	\$ <u>19,661.27</u>

PAYMENTS FOR SERVICES RENDERED BY OTHER THAN EMPLOYEES

Report all information concerning outside rate, management, construction, advertising, labor relations, public relations, or other similar professional services rendered the respondent for which aggregate payments during the year to any corporation, partnership, individual, or organization of any kind whatever amounting to \$500 or more.

Name of Recipient	Water Amount	Wastewater Amount	Description of Service
<u>Total Treatment</u>	\$ <u>1,237.50</u>	\$ <u>3,712.50</u>	<u>water/sewer operator</u>
<u>Bill Brown</u>	\$ <u>1,750.00</u>	\$ <u>5,250.00</u>	<u>ongoing repairs & maint.</u>
<u>Jim Gadsden</u>	\$ <u>3,177.75</u>	\$ <u>9,533.25</u>	<u>on-going repairs & maint.</u>
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____

Pine Ridge Management
Corporation

UTILITY NAME: _____

PO Box 307
Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

CONTRIBUTIONS IN AID OF CONSTRUCTION (271)

(a)	Water (b)	Wastewater (c)	Total (d)
1) Balance first of year _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
2) Add credits during year _____	\$ _____	\$ _____	\$ _____
3) Total _____	_____	_____	_____
4) Deduct charges during the year _____	_____	_____	_____
5) Balance end of year _____	_____	_____	_____
6) Less Accumulated Amortization _____	_____	_____	_____
7) Net CIAC _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

ADDITIONS TO CONTRIBUTIONS IN AID OF CONSTRUCTION DURING YEAR (CREDITS)

Report below all developers or contractors agreements from which cash or property was received during the year.		Indicate "Cash" or "Property"	Water	Wastewater
_____		_____	_____	_____
_____		_____	_____	_____
_____		_____	_____	_____
_____		_____	_____	_____
_____		_____	_____	_____
Sub-total _____			\$ _____	\$ _____
Report below all capacity charges, main extension charges and customer connection charges received during the year.				
Description of Charge	Number of Connections	Charge per Connection		
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Credits During Year (Must agree with line # 2 above.) _____			\$ _____	\$ _____

ACCUMULATED AMORTIZATION OF CIAC (272)

	Water	Wastewater	Total
Balance First of Year _____	\$ _____	\$ _____	\$ _____
Add Debits During Year: _____	_____	_____	_____
Deduct Credits During Year: _____	_____	_____	_____
Balance End of Year (Must agree with line #6 above.) _____	\$ _____	\$ _____	\$ _____

**** COMPLETION OF SCHEDULE REQUIRED ONLY IF AFUDC WAS CHARGED DURING YEAR ****

UTILITY NAME: Pine Ridge Management Corporation

YEAR OF REPORT
DECEMBER 31, 2006

SCHEDULE "A"

SCHEDULE OF COST OF CAPITAL USED FOR AFUDC CALCULATION (1)

Not Applicable

Class of Capital (a)	Dollar Amount (b)	Percentage of Capital (c)	Actual Cost Rates (d)	Weighted Cost [c x d] (e)
Common Equity	\$ _____	_____ %	_____ %	_____ %
Preferred Stock	_____	_____ %	_____ %	_____ %
Long Term Debt	_____	_____ %	_____ %	_____ %
Customer Deposits	_____	_____ %	_____ %	_____ %
Tax Credits - Zero Cost	_____	_____ %	0.00 %	_____ %
Tax Credits - Weighted Cost	_____	_____ %	_____ %	_____ %
Deferred Income Taxes	_____	_____ %	_____ %	_____ %
Other (Explain)	_____	_____ %	_____ %	_____ %
Total	\$ <u>0</u>	<u>100.00</u> %		<u>0</u> %

(1) Must be calculated using the same methodology used to calculate AFUDC rate approved by the Commission.

APPROVED AFUDC RATE

Current Commission approved AFUDC rate: _____ %
Commission Order Number approving AFUDC rate: _____

UTILITY NAME: Pine Ridge Management

Corporation

SCHEDULE "B"

Class of Capital (a)	Per Book Balance (b)	Non-utility Adjustments (c)	Non-juris. Adjustments (d)	Other (1) Adjustments (e)	Capital Structure Used for AFUDC Calculation (f)
Common Equity	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Preferred Stock	_____	_____	_____	_____	_____
Long Term Debt	92,586.70	_____	_____	_____	_____
Customer Deposits	_____	_____	_____	_____	_____
Tax Credits-Zero Cost	_____	_____	_____	_____	_____
Tax Credits-Weighted	_____	_____	_____	_____	_____
Cost of Capital	_____	_____	_____	_____	_____
Deferred Income Taxes	_____	_____	_____	_____	_____
Other (Explain)	_____	_____	_____	_____	_____
Total	\$92,586.70	\$ _____	\$ _____	\$ _____	\$ _____

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

WATER OPERATING SECTION

Pine Ridge Management

Corporation

UTILITY NAME: _____

PO Box 307

Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

WATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
301	Organization_____	\$ _____	\$ _____	\$ _____	\$ _____
302	Franchises_____	_____	_____	_____	_____
303	Land and Land Rights_____	_____	_____	_____	_____
304	Structures and Improvements_____	63,776.14	_____	_____	63,776.14
305	Collecting and Impounding Reservoirs_____	_____	_____	_____	_____
306	Lake, River and Other Intakes_____	_____	_____	_____	_____
307	Wells and Springs_____	_____	_____	_____	_____
308	Infiltration Galleries and Tunnels_____	_____	_____	_____	_____
309	Supply Mains_____	_____	_____	_____	_____
310	Power Generation Equipment_____	_____	_____	_____	_____
311	Pumping Equipment_____	_____	_____	_____	_____
320	Water Treatment Equipment_____	_____	_____	_____	_____
330	Distribution Reservoirs and Standpipes_____	_____	_____	_____	_____
331	Transmission and Distribution Lines_____	_____	_____	_____	_____
333	Services_____	_____	_____	_____	_____
334	Meters and Meter Installations_____	_____	_____	_____	_____
335	Hydrants_____	_____	_____	_____	_____
336	Backflow Prevention Devices_____	_____	_____	_____	_____
339	Other Plant and Miscellaneous Equipment_____	_____	_____	_____	_____
340	Office Furniture and Equipment_____	_____	_____	_____	_____
341	Transportation Equipment_____	_____	_____	_____	_____
342	Stores Equipment_____	_____	_____	_____	_____
343	Tools, Shop and Garage Equipment_____	_____	_____	_____	_____
344	Laboratory Equipment_____	_____	_____	_____	_____
345	Power Operated Equipment_____	_____	_____	_____	_____
346	Communication Equipment_____	_____	_____	_____	_____
347	Miscellaneous Equipment_____	_____	_____	_____	_____
348	Other Tangible Plant_____	_____	_____	_____	_____
	Total Water Plant_____	\$ 63,776.14	\$ 0	\$ 0	\$ 63,776.14

UTILITY NAME:
Pine Ridge Management
Corporation
PO Box 307
Lake Placid, FL 33862

YEAR OF REPORT
 DECEMBER 31, 2006

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WATER

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)	Credits (h)	Accum. Depr. Balance End of Year (f+g+h=i) (i)
304	Structures and Improvements	39.5	0	2.086%	\$ 9,990.79	\$	\$ 1,330.57	\$ 11,321.36
305	Collecting and Impounding Reservoirs		%					
306	Lake, River and Other Intakes		%					
307	Wells and Springs		%					
308	Infiltration Galleries & Tunnels		%					
309	Supply Mains		%					
310	Power Generating Equipment		%					
311	Pumping Equipment		%					
320	Water Treatment Equipment		%					
330	Distribution Reservoirs & Standpipes		%					
331	Trans. & Dist. Mains		%					
333	Services		%					
334	Meter & Meter Installations		%					
335	Hydrants		%					
336	Backflow Prevention Devices		%					
339	Other Plant and Miscellaneous Equipment		%					
340	Office Furniture and Equipment		%					
341	Transportation Equipment		%					
342	Stores Equipment		%					
343	Tools, Shop and Garage Equipment		%					
344	Laboratory Equipment		%					
345	Power Operated Equipment		%					
346	Communication Equipment		%					
347	Miscellaneous Equipment		%					
348	Other Tangible Plant		%					
	Totals				\$ 9,990.79	\$	\$ 1,330.57	\$ 11,321.36

* This amount should tie to Sheet F-5.

Pine Ridge Management

UTILITY NAME: _____

Corporation

PO Box 307

Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

WATER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
601	Salaries and Wages - Employees_____	\$ <u>0</u>
603	Salaries and Wages - Officers, Directors, and Majority Stockholders_____	<u>0</u>
604	Employee Pensions and Benefits_____	<u>0</u>
610	Purchased Water_____	<u>0</u>
615	Purchased Power_____	<u>0</u>
616	Fuel for Power Production_____	<u>0</u>
618	Chemicals_____	<u>0</u>
620	Materials and Supplies_____	<u>966.26</u>
630	Contractual Services:	
	Billing_____	<u>0</u>
	Professional_____	<u>9,056.74</u>
	Testing_____	
	Other_____	
640	Rents_____	
650	Transportation Expense_____	
655	Insurance Expense_____	<u>252.99</u>
665	Regulatory Commission Expenses (Amortized Rate Case Expense)_____	
670	Bad Debt Expense_____	
675	Miscellaneous Expenses_____	<u>25,203.37</u>
	Total Water Operation And Maintenance Expense_____	\$ <u>35,479.36</u>
	* This amount should tie to Sheet F-3.	

WATER CUSTOMERS

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers		Total Number of Meter Equivalents (c x e) (f)
			Start of Year (d)	End of Year (e)	
Residential Service					
5/8"	D	1.0	<u>135</u>	<u>135</u>	<u>135</u>
3/4"	D	1.5			
1"	D	2.5			
1 1/2"	D,T	5.0			
General Service					
5/8"	D	1.0			
3/4"	D	1.5			
1"	D	2.5			
1 1/2"	D,T	5.0			
2"	D,C,T	8.0			
3"	D	15.0			
3"	C	16.0			
3"	T	17.5			
Unmetered Customers	<u>5</u>		<u>5</u>	<u>5</u>	<u>5</u>
Other (Specify)					
Total			<u>140</u>	<u>140</u>	<u>140</u>
** D = Displacement C = Compound T = Turbine					

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 4471110 Plant Name: Pine Ridge Park

III. Daily Data for the Month/Year of: October 2006

Means of Achieving Four-Log Virus Inactivation/Removal: * ☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines) ☐ Ultraviolet Radiation ☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide															
Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide															
CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*															
CT Calculations															
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations											
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-cm ²	Minimum UV Dose Required, mW-cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
1															
2	X													0.70	Meter O/S ordered new one.
3	X													0.70	
4	X													0.90	
5	X													0.60	
6															
7	X													1.10	
8															
9	X													0.40	
10	X													0.90	
11	X													1.10	
12															
13	X													1.00	
14	X													1.10	
15															
16	X													1.40	
17	X													1.50	
18	X													1.10	
19															
20	X													1.00	
21	X													1.00	
22															
23	X													1.00	
24	X													1.30	
25	X													1.20	
26															
27	X													1.30	
28	X													0.90	
29															
30	X													0.40	
31															
Total			0												
Average															
Maximum			0												

* Refer to the instructions for this report to determine which plants must provide this information.

PWS Identification Number: 4471110

Plant Name: Pine Ridge Park

III. Daily Data for the Month/Year of: November 2006

Means of Achieving Four-Log Virus Inactivation/Removal: *

☐ Ultraviolet Radiation

☐ Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System:

☒ Free Chlorine	☐ Combined Chlorine (Chloramines)	☐ Chlorine Dioxide
---	--	---

2. **Cost Calculations for UV Dose to Demonstrate Four-Log Virus Inactivation, if Applicable.**

[illegible][illegible]

OF
OF

Visited	Concentration	Distance	Lowest Minimum Concentration
1	100%	100%	100%
2	100%	100%	100%
3	100%	100%	100%
4	100%	100%	100%
5	100%	100%	100%
6	100%	100%	100%
7	100%	100%	100%
8	100%	100%	100%
9	100%	100%	100%
10	100%	100%	100%
11	100%	100%	100%
12	100%	100%	100%
13	100%	100%	100%
14	100%	100%	100%
15	100%	100%	100%
16	100%	100%	100%
17	100%	100%	100%
18	100%	100%	100%
19	100%	100%	100%
20	100%	100%	100%
21	100%	100%	100%
22	100%	100%	100%
23	100%	100%	100%
24	100%	100%	100%
25	100%	100%	100%
26	100%	100%	100%
27	100%	100%	100%
28	100%	100%	100%
29	100%	100%	100%
30	100%	100%	100%
31	100%	100%	100%
32	100%	100%	100%
33	100%	100%	100%
34	100%	100%	100%
35	100%	100%	100%
36	100%	100%	100%
37	100%	100%	100%
38	100%	100%	100%
39	100%	100%	100%
40	100%	100%	100%
41	100%	100%	100%
42	100%	100%	100%
43	100%	100%	100%
44	100%	100%	100%
45	100%	100%	100%
46	100%	100%	100%
47	100%	100%	100%
48	100%	100%	100%
49	100%	100%	100%
50	100%	100%	100%
51	100%	100%	100%
52	100%	100%	100%
53	100%	100%	100%
54	100%	100%	100%
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56	100%	100%	100%
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89	100%	100%	100%
90	100%	100%	100%
91	100%	100%	100%
92	100%	100%	100%
93	100%	100%	100%
94	100%	100%	100%
95	100%	100%	100%
96	100%	100%	100%
97	100		

Day of Operator	Hours of Enriched	Net Quantity	(C) Before or at Measurement	Customer Temp.	Minimum Operating Temp.	UV Dose at Remote	Emergency or Alarm

the	Plant in	Water	Peak Flow	During Peaks	Peak Flow	Water	Water if	Required	UV Dose, μCi	Required, μCi	Point in	Distribution	Involves Taking Wa	Conditions, Repair o
the	Plant in	Water	Peak Flow	During Peaks	Peak Flow	Water	Water if	Required	UV Dose, μCi	Required, μCi	Point in	Distribution	Involves Taking Wa	Conditions, Repair o

Month	Operation "X"	Production Rate, gpd	Flow, mg/L	Temperature, °C	Applicable mg-min/L	System, mg/L	System, mg/L	Out of System, mg/L
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

[illegible][illegible][illegible][illegible][illegible][illegible][illegible][illegible][illegible][illegible][illegible]

	X									100
"15"	X									180

[illegible][illegible][illegible][illegible][illegible][illegible][illegible]

X								0.20
Y								1.00

[illegible][illegible][illegible][illegible]

10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473
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[illegible]

Average	

0	maximum
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Refer to the instructions for this report to determine which plants must provide this information.

Page 2
P Form 62-555 900(3) Alternate

100

MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 4471110 Plant Name: Pine Ridge Park

III. Daily Data for the Month/Year of: December 2006

Means of Achieving Four-Log Virus Inactivation/Removal: *

☐ Ultraviolet Radiation ☐ Other (Describe):

☐ Free Chlorine ☐ Chlorine Dioxide ☐ Ozone ☐ Combined Chlorine (Chloramines)

Type of Disinfectant Residual Maintained in Distribution System: ☒ Free Chlorine ☐ Combined Chlorine (Chloramines) ☐ Chlorine Dioxide

Type of Disinfectant Residual maintained in Distribution System													
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant in Operation	Net Quantity of Finished Water Produced, gal	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*							Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations						UV Dose			
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at Customer Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L			Lowest Operating UV Dose, mW-sec/cm²
1	X										1.00	Meter O/S	
2	X										1.30		
3													
4	X										1.00		
5	X										0.80		
6	X										0.90		
7													
8	X										1.10		
9	X										1.00		
10													
11	X										1.10		
12	X										0.90		
13	X										1.00		
14													
15	X										0.90		
16	X										0.90		
17													
18	X										0.40		
19													
20	X										1.10		
21	X										1.20		
22	X										1.00		
23	X										1.10		
24													
25	X										1.30		
26	X										0.90		
27													
28	X										0.80		
29	X										1.00		
30	X										0.90		
31	X										0.70		
Total			0										
Average													
Maximum			0										

* Refer to the instructions for this report to determine which plants must provide this information.

Pine Ridge Management
Corporation
PO Box 307

UTILITY NAME: Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

SYSTEM NAME: Water Plant

WELLS AND WELL PUMPS

(a)	#1 (b)	#2 (c)	#3 (d)	#4 (e)
Year Constructed _____	<u>about 1970</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Types of Well Construction and Casing _____	<u>PVC</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
	<u>NA</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
	<u>NA</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Depth of Wells _____	<u>200 ft.</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Diameters of Wells _____	<u>2 in</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Pump - GPM _____	<u>50 GPM</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Motor - HP _____	<u>1.5 HP</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Motor Type * _____	<u>centrifugal</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Yields of Wells in GPD _____	<u>4,000 GPD</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>
Auxiliary Power _____	<u>NA</u>	<u>Same</u>	<u>Same</u>	<u>Same</u>

* Submersible, centrifugal, etc.

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete) _____	<u>concrete</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>
Capacity of Tank _____	<u>open drip</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>
Ground or Elevated _____	<u>3 HP</u>	<u>NA</u>	<u>NA</u>	<u>NA</u>

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
<u>Motors</u>				
Manufacturer _____	<u>Sta Rite</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>
Type _____	<u>open drip</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>
Rated Horsepower _____	<u>3 HP</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>
<u>Pumps</u>				
Manufacturer _____	<u>Sta Rite</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>
Type _____	<u>centrifugal</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>
Capacity in GPM _____	<u>60 GPM</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>
Average Number of Hours Operated Per Day _____	<u>24 hr.</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>
Auxiliary Power _____	<u>NA</u>	<u>Same</u>	<u>Same</u>	<u>NA</u>

Corporation

UTILITY NAME:

PO Box 307

Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)

Permitted Gals. per day	17,200 gal		
Type of Source	ground water	NA	NA

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:

Type_____	eration	_____	_____
Make_____	unavailable	_____	_____
Permitted Capacity (GPD)_____	20,000 GPD	_____	_____
High service pumping			
Gallons per minute_____	13.9 GPD	_____	_____
Reverse Osmosis_____	NA	_____	_____
Lime Treatment		NA	NA
Unit Rating_____	NA	_____	_____
Filtration			
Pressure Sq. Ft._____	NA	_____	_____
Gravity GPD/Sq.Ft._____	NA	_____	_____
Disinfection			
Chlorinator_____	Stenner	_____	_____
Ozone_____	NA	_____	_____
Other_____	NA	_____	_____
Auxiliary Power_____	NA	_____	_____

UTILITY NAME: Pine Ridge Management Corporation

YEAR OF REPORT
DECEMBER 31, 2006

SYSTEM NAME: water plant

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. 150
2. Maximum number of ERCs * which can be served. 150
3. Present system connection capacity (in ERCs *) using existing lines. 135
4. Future connection capacity (in ERCs *) upon service area buildout. 15
5. Estimated annual increase in ERCs *. 2
6. Is the utility required to have fire flow capacity? No
If so, how much capacity is required? _____
7. Attach a description of the fire fighting facilities. NA
8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
NA
9. When did the company last file a capacity analysis report with the DEP? unavailable
10. If the present system does not meet the requirements of DEP rules, submit the following:
 - a. Attach a description of the plant upgrade necessary to meet the DEP rules. NA
 - b. Have these plans been approved by DEP? NA
 - c. When will construction begin? NA
 - d. Attach plans for funding the required upgrading. NA
 - e. Is this system under any Consent Order with DEP? yes
11. Department of Environmental Protection ID # South Florida Water Management District 44-71110
12. Water Management District Consumptive Use Permit # 47-00480-W
 - a. Is the system in compliance with the requirements of the CUP? yes
 - b. If not, what are the utility's plans to gain compliance? _____

* An ERC is determined based on one of the following methods:

(a) If actual flow data are available from the preceding 12 months:

Divide the total annual single family residence (SFR) gallons sold by the average number of SFR customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:

ERC = (Total SFR gallons sold (omit 000)/365 days/350 gallons per day).

WASTEWATER OPERATING SECTION

Pine Ridge Management
Corporation

UTILITY NAME: _____
PO Box 307
Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

WASTEWATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
351	Organization_____	\$ _____	\$ _____	\$ _____	\$ _____
352	Franchises_____	_____	_____	_____	_____
353	Land and Land Rights_____	_____	_____	_____	_____
354	Structures and Improvements_____	63,776.14	0	0	63,776.14
355	Power Generation Equipment_____	_____	_____	_____	_____
360	Collection Sewers - Force_____	_____	_____	_____	_____
361	Collection Sewers - Gravity_____	_____	_____	_____	_____
362	Special Collecting Structures_____	_____	_____	_____	_____
363	Services to Customers_____	_____	_____	_____	_____
364	Flow Measuring Devices_____	_____	_____	_____	_____
365	Flow Measuring Installations_____	_____	_____	_____	_____
370	Receiving Wells_____	_____	_____	_____	_____
371	Pumping Equipment_____	_____	_____	_____	_____
380	Treatment and Disposal Equipment_____	_____	_____	_____	_____
381	Plant Sewers_____	_____	_____	_____	_____
382	Outfall Sewer Lines_____	_____	_____	_____	_____
389	Other Plant and Miscellaneous Equipment_____	_____	_____	_____	_____
390	Office Furniture and Equipment_____	_____	_____	_____	_____
391	Transportation Equipment_____	_____	_____	_____	_____
392	Stores Equipment_____	_____	_____	_____	_____
393	Tools, Shop and Garage Equipment_____	_____	_____	_____	_____
394	Laboratory Equipment_____	_____	_____	_____	_____
395	Power Operated Equipment_____	_____	_____	_____	_____
396	Communication Equipment_____	_____	_____	_____	_____
397	Miscellaneous Equipment_____	_____	_____	_____	_____
398	Other Tangible Plant_____	_____	_____	_____	_____
	Total Wastewater Plant_____	\$ 63,776.14	\$ 0	\$ 0	\$ 63,776.14*

* This amount should tie to sheet F-5.

Pine Ridge Management
Corporation
PO Box 307
Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WASTEWATER

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)	Credits (h)	Accum. Depr. Balance End of Year (f-g+h=i) (i)
354	Structures and Improvements	39.5	0	2.096	\$ 9,990.79	\$ 0	\$ 1,330.57	\$ 11,321.36
355	Power Generation Equipment		%	%				
360	Collection Sewers - Force		%	%				
361	Collection Sewers - Gravity		%	%				
362	Special Collecting Structures		%	%				
363	Services to Customers		%	%				
364	Flow Measuring Devices		%	%				
365	Flow Measuring Installations		%	%				
370	Receiving Wells		%	%				
371	Pumping Equipment		%	%				
380	Treatment and Disposal Equipment		%	%				
381	Plant Sewers		%	%				
382	Outfall Sewer Lines		%	%				
389	Other Plant and Miscellaneous Equipment		%	%				
390	Office Furniture and Equipment		%	%				
391	Transportation Equipment		%	%				
392	Stores Equipment		%	%				
393	Tools, Shop and Garage Equipment		%	%				
394	Laboratory Equipment		%	%				
395	Power Operated Equipment		%	%				
396	Communication Equipment		%	%				
397	Miscellaneous Equipment		%	%				
398	Other Tangible Plant		%	%				
	Totals				\$ 9,990.79	\$ 0	\$ 1,330.57	\$ 11,321.36

* This amount should tie to Sheet F-5.

UTILITY NAME: Pine Ridge Management Corporation

YEAR OF REPORT
DECEMBER 31, 2006

WASTEWATER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
701	Salaries and Wages - Employees	\$
703	Salaries and Wages - Officers, Directors, and Majority Stockholders	
704	Employee Pensions and Benefits	
710	Purchased Wastewater Treatment	
711	Sludge Removal Expense	
715	Purchased Power	
716	Fuel for Power Production	
718	Chemicals	
720	Materials and Supplies	<u>5,961.73</u>
730	Contractual Services:	
	Billing	
	Professional	<u>22,747.46</u>
	Testing	
	Other	
740	Rents	
750	Transportation Expense	
755	Insurance Expense	<u>758.97</u>
765	Regulatory Commission Expenses (Amortized Rate Case Expense)	
770	Bad Debt Expense	
775	Miscellaneous Expenses	<u>33,963.41</u>
	Total Wastewater Operation And Maintenance Expense	\$ <u>63,431.57</u>
* This amount should tie to Sheet F-3.		

WASTEWATER CUSTOMERS

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers		Total Number of Meter Equivalents (c x e) (f)
			Start of Year (d)	End of Year (e)	
Residential Service					
All meter sizes	D	1.0	<u>136</u>	<u>136</u>	<u>136</u>
General Service					
5/8"	D	1.0			
3/4"	D	1.5			
1"	D	2.5			
1 1/2"	D,T	5.0			
2"	D,C,T	8.0			
3"	D	15.0			
3"	C	16.0			
3"	T	17.5			
Unmetered Customers					
Other (Specify)	<u>Flat Rate</u>		<u>5</u>	<u>5</u>	<u>5</u>
Total			<u>141</u>	<u>141</u>	<u>141</u>

** D = Displacement
C = Compound
T = Turbine

Pine Ridge Management
Corporation
PO Box 307

UTILITY NAME: - Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

PUMPING EQUIPMENT

Lift Station Number	1					
Make or Type and nameplate data on pump	2 X Gould 1.0 submersible pump			Not		
Year installed	1970			Applicable		
Rated capacity	1130					
Size	4 ft diameter					
Power						
Electric						
Mechanical	NA					
Nameplate data of motor	NA					
(pump/motor encased)						

SERVICE CONNECTIONS

Size (inches)	3 in					
Type (PVC, VCP, etc.)	PVC			Not		
Average length	25 ft			Applicable		
Number of active service connections	136					
Beginning of year	136					
Added during year	0					
Retired during year	0					
End of year	136					
Give full particulars concerning inactive connections	NA					

COLLECTING AND FORCE MAINS

	Collecting Mains			Force Mains		
Size (inches)	6 in					
Type of main	PVC					
Length of main (nearest foot)	7,200 ft		Not		Not	
Beginning of year	7,200 ft		Applicable		Applicable	
Added during year	0					
Retired during year	0					
End of year	7,200 ft					

MANHOLES

Size (inches)	24 in		
Type of Manhole	concrete		
Number of Manholes:	(metal lid)		Not
Beginning of year	18		applicable
Added during year	0		
Retired during year	0		
End of Year	18		

UTILITY NAME: _____

Corporation

SYSTEM NAME: _____

Sewer PlantYEAR OF REPORT
DECEMBER 31, 2006

TREATMENT PLANT

Manufacturer _____	<u>Dauco</u>	X	X
Type _____			
"Steel" or "Concrete" _____	<u>concrete</u>		
Total Permitted Capacity _____	<u>20,000 GPD</u>		
Average Daily Flow _____	<u>.016</u>		
Method of Effluent Disposal _____	<u>per K Pond</u>		
Permitted Capacity of Disposal _____	<u>20,000 GPD</u>		
Total Gallons of Wastewater treated _____	<u>5.728</u>		

MASTER LIFT STATION PUMPS

Manufacturer _____	<u>Gould</u>	<u>Gould</u>	X	X	X	X
Capacity (GPM's) _____	<u>90 GPM</u>	<u>90 GPM</u>				
Motor:						
Manufacturer _____	<u>Gould</u>	<u>Gould</u>				
Horsepower _____	<u>1.0</u>	<u>1.0</u>				
Power (Electric or Mechanical) _____	<u>Electric</u>	<u>Electric</u>				

PUMPING WASTEWATER STATISTICS

Months	Gallons of Treated Wastewater	Effluent Reuse Gallons to Customers	Effluent Gallons Disposed of on site
January _____	<u>.555</u>	<u>0</u>	<u>0</u>
February _____	<u>.528</u>		
March _____	<u>.711</u>		
April _____	<u>.492</u>		
May _____	<u>.483</u>		
June _____	<u>.455</u>		
July _____	<u>.569</u>		
August _____	<u>.567</u>		
September _____	<u>.689</u>		
October _____	<u>.590</u>		
November _____	<u>.577</u>		
December _____	<u>.556</u>		
Total for year _____	<u>6.235</u>		

If Wastewater Treatment is purchased, indicate the vendor: NA

Pine Ridge Management
Corporation
PO Box 307

UTILITY NAME: Lake Placid, FL 33862

SYSTEM NAME: Sewer plant

YEAR OF REPORT
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GENERAL WASTEWATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present number of ERCs* now being served. 150
2. Maximum number of ERCs* which can be served. 150
3. Present system connection capacity (in ERCs*) using existing lines. 135
4. Future connection capacity (in ERCs*) upon service area buildout. 15
5. Estimated annual increase in ERCs*. 2
6. Describe any plans and estimated completion dates for any enlargements or improvements of this system
No plans at this time
7. If the utility uses reuse as a means of effluent disposal, provide a list of the reuse end users and the amount of reuse provided to each, if known. NA
8. If the utility does not engage in reuse, has a reuse feasibility study been completed? No
If so, when? NA
9. Has the utility been required by the DEP or water management district to implement reuse? No
If so, what are the utility's plans to comply with this requirement? NA
10. When did the company last file a capacity analysis report with the DEP? unknown
11. If the present system does not meet the requirements of DEP rules, submit the following:
 - a. Attach a description of the plant upgrade necessary to meet the DEP rules.
 - b. Have these plans been approved by DEP? NA
 - c. When will construction begin? NA
 - d. Attach plans for funding the required upgrading.
 - e. Is this system under any Consent Order with DEP? NA
12. Department of Environmental Protection ID # FLA 013 928

* An ERC is determined based on one of the following methods:

(a) If actual flow data are available from the preceding 12 months:

Divide the total annual single family residence (SFR) gallons sold by the average number of SFR customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:

ERC = (Total SFR gallons sold (omit 000)/365 days/280 gallons per day).

Pine Ridge Management
Corporation
UTILITY NAME: PO Box 307
Lake Placid, FL 33862

YEAR OF REPORT
DECEMBER 31, 2006

CERTIFICATION OF ANNUAL REPORT

I HEREBY CERTIFY, to the best of my knowledge and belief:

- | | | | |
|--|---|----|--|
| YES
☒ | NO
☐ | 1. | The utility is in substantial compliance with the Uniform System of Accounts prescribed by the Florida Public Service Commission in Rule 25-30.115 (1), Florida Administrative Code. |
| YES
☒ | NO
☐ | 2. | The utility is in substantial compliance with all applicable rules and orders of the Florida Public Service Commission. |
| YES
☐ | NO
☒ | 3. | There have been no communications from regulatory agencies concerning noncompliance with, or deficiencies in, financial reporting practices that could have a material effect on the financial statement of the utility. |
| YES
☒ | NO
☐ | 4. | The annual report fairly represents the financial condition and results of operations of the respondent for the period presented and other information and statements presented in the report as to the business affairs of the respondent are true, correct, and complete for the period for which it represents. |

Items Certified

1. ☒	2. ☒	3. ☒	4. ☒	<u>Virginia L. Gadsden*</u> (signature of Chief Executive Officer of the utility)
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Date: 4-28-07

1. ☐	2. ☐	3. ☐	4. ☐	_____ (signature of Chief Financial Officer of the utility)
--------------------------------	--------------------------------	--------------------------------	--------------------------------	--

Date: _____

* Each of the four items must be certified YES or NO. Each item need not be certified by both officers. The items being certified by the officer should be indicated in the appropriate area to the left of the signature.

Notice: Section 837.06, Florida Statutes, provides that any person who knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his duty shall be guilty of a misdemeanor of the second degree.

**Reconciliation of Revenue to
Regulatory Assessment Fee Revenue**

Water Operations

Class C

Pine Ridge Management

Company: Corporation

For the Year Ended December 31, 2006

(a)	(b)	(c)	(d)
Accounts	Gross Water Revenues Per Sch. F-3	Gross Water Revenues Per RAF Return	Difference (b) - (c)
Gross Revenue:			
Residential	\$ 7,280.00	\$ 7,280.00	\$ 0
Commercial	490.00	490.00	0
Industrial			
Multiple Family	10,269.45	10,269.45	0
Guaranteed Revenues			
Other			
Total Water Operating Revenue	\$ 18,039.45	\$ 18,039.45	\$ 0
LESS: Expense for Purchased Water from FPSC-Regulated Utility	0	0	0
Net Water Operating Revenues	\$ 18,039.45	\$ 18,039.45	\$ 0

Explanations:

Instructions:

For the current year, reconcile the gross water revenues reported on Schedule F-3 with the gross water revenues reported on the company's regulatory assessment fee return. Explain any differences reported in column (d).

**Reconciliation of Revenue to
Regulatory Assessment Fee Revenue
Wastewater Operations
Class C**

**Pine Ridge Management
Company: Corporation**

For the Year Ended December 31, 2006

(a)	(b)	(c)	(d)
Accounts	Gross Wastewater Revenues Per Sch. F-3	Gross Wastewater Revenues Per RAF Return	Difference (b) - (c)
Gross Revenue:			
Residential	\$ 57,884.95	\$ 57,884.95	\$ 0
Commercial	1,470.00	1,470.00	0
Industrial			
Multiple Family			
Guaranteed Revenues			
Other			
Total Wastewater Operating Revenue	\$ 59,354.95	\$ 59,354.95	\$ 0
LESS: Expense for Purchased Wastewater from FPSC-Regulated Utility			
Net Wastewater Operating Revenues	\$ 59,354.95	\$ 59,354.95	\$ 0

Explanations:

Instructions:

For the current year, reconcile the gross wastewater revenues reported on Schedule F-3 with the gross wastewater revenues reported on the company's regulatory assessment fee return. Explain any differences reported in column (d).