

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000169

**FILED**  
**Jan 13, 2016**  
**Secretary of State**  
**CC8079243304**

**Entity Name:** SUMMERVILLE CHARTER SCHOOL, INC.

**Current Principal Place of Business:**

305 ALCAZAR AVE  
SUITE # 3  
CORAL GABLES, FL 33134

**Current Mailing Address:**

305 ALCAZAR AVE  
SUITE # 3  
CORAL GABLES, FL 33134

**FEI Number:** 20-0631240

**Certificate of Status Desired:** Yes

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

MACHADO, LUIS  
305 ALCAZAR AVE  
SUITE # 3  
CORAL GABLES, FL 33134 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name MACHADO, LUIS  
Address 305 ALCAZAR AVE SUITE 3  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name MACHADO, CEFERINO  
Address 305 ALCAZAR AVE SUITE 3  
City-State-Zip: CORAL GABLES FL 33134

Title S  
Name AVIÑO, JOAQUIN G  
Address P.O. BOX 831766  
City-State-Zip: MIAMI FL 33283

*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:** LUIS MACHADO

DP

01/13/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date