

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P31674

**Entity Name:** ASSOCIATION OF AMERICAN SCHOOLS IN SOUTH AMERICA, INC.**FILED**  
**Feb 27, 2019**  
**Secretary of State**  
**5028464653CC****Current Principal Place of Business:**1911 N.W. 150TH AVE.  
101  
PEMBROKE PINES, FL 33028**Current Mailing Address:**1911 N.W. 150TH AVE.  
101  
PEMBROKE PINES, FL 33028 US**FEI Number: 58-1333760****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RHOADS, DERECK H. EXECUTIVE DIRECTOR  
1911 NW 150 AVENUE  
101  
PEMBROKE PINES, FL 33028 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: DERECK RHOADS****02/27/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** PAST PRES.  
**Name** HEIDE, MADELEINE  
**Address** CASITA 17-11-6510  
ACADEMIA COTOPAXI  
**City-State-Zip:** QUITO**Title** SECRETARY  
**Name** MANCUSO, STEVE .MR.  
**Address** AV. COUNTRY CLUB  
CALLE RICANTE  
**City-State-Zip:** BARCELONA 6001**Title** TREASURER  
**Name** MOORE, JEREMY  
**Address** PO BOX 31364  
**City-State-Zip:** GRAND CAYMAN KYI 1206**Title** BOARD MEMBER  
**Name** NUNES, LUCY  
**Address** R. VIG. JOAO DE PONTES 537  
SANTO AMARO  
**City-State-Zip:** SAO PAULO OC**Title** VP  
**Name** SONG CHEN, CATARINA MRS.  
**Address** AV. PROF. MARIO WERNECK 3002  
BARRIO BURITIS  
**City-State-Zip:** BELO HORIZONTE CEP-305575**Title** PRESIDENT  
**Name** BOERNER, RICHARD  
**Address** GRADED SCHOOL  
AVE PRES GIOVANNI GRONCHI 4710  
05724-002 MORUMBI  
**City-State-Zip:** SAO PAULO**Title** BOARD MEMBER  
**Name** BEATA, MATTHEW  
**Address** AV DRA. MARIA LUISA SALDUN DE  
RODRIGUEZ 2375  
**City-State-Zip:** MONTEVIDEO**Title** BOARD MEMBER  
**Name** JACOBSEN, KERRY  
**Address** AV LAS PALMERAS 325  
LA MOLINA 15023  
**City-State-Zip:** LIMA OC**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: DERECK RHOADS****EXECUTIVE DIRECTOR****02/27/2019**

**Officer/Director Detail Continued :**

Title BOARD MEMBER  
Name MARSHAL, PATRICIA  
Address 11 CALLE 15-79  
City-State-Zip: GUATEMALA CITY OC

Title EXECUTIVE DIRECTOR  
Name RHOADS, DERECK H  
Address 1911 NW 150 AVENUE  
City-State-Zip: PEMBROKE PINES FL 33028