

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 16, 2007**  
**Secretary of State**

DOCUMENT# N04000000169

**Entity Name:** SUMMERVILLE CHARTER SCHOOL, INC.**Current Principal Place of Business:**10511 NORTH KENDALL DRIVE  
SUITE C 205  
MIAMI, FL 33176**New Principal Place of Business:**305 ALCAZAR AVE  
SUITE # 3  
CORAL GABLES, FL 33134**Current Mailing Address:**P.O. BOX 520682  
MIAMI, FL 33152**New Mailing Address:**

FEI Number: 20-0631240

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**MACHADO, LUIS  
10511 NORTH KENDALL DRIVE  
SUITE C 205  
MIAMI, FL 33176 US**Name and Address of New 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: LUIS MACHADO

11/16/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: DP ( ) Delete  
Name: MACHADO, LUIS  
Address: P O BOX 520682  
City-St-Zip: MIAMI, FL 331520682Title: S ( ) Delete  
Name: AVINO, JOAQUIN  
Address: P.O.BOX 831766  
City-St-Zip: MIAMI, FL 33283Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: VP (X) Change ( ) Addition  
Name: MACHADO, CEFERINO  
Address: P.O.BOX 520682  
City-St-Zip: MIAMI, FL 33152Title: S ( ) Change (X) Addition  
Name: AVIÑO, JOAQUIN  
Address: P.O. BOX 831766  
City-St-Zip: MIAMI, FL 33283

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LUIS MACHADO

DP

11/16/2007

Electronic Signature of Signing Officer or Director

Date