

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N02000002506

Entity Name: JFK MEDICAL CENTER CHARTER SCHOOL, INC.

Current Principal Place of Business:

4696 DAVIS ROAD
LAKE WORTH, FL 33461

Current Mailing Address:

4696 DAVIS ROAD
LAKE WORTH, FL 33461

FEI Number: 01-0683331

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIMMEL, BERNARD DR.
4696 DAVIS ROAD
LAKE WORTH, FL 33461 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: DR. BERNARD KIMMEL

08/23/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name KIMMEL, BERNARD DR.
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name ISLA MARRERO, LOURDES
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name GERMAN, TODD
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR, SECRETARY
Name DIAZ, ANA
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name CONCEPCION, DAVID
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name ESQUIJAROSA, JENNIFER
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name MORALES, TONY
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name MARIN, LOUIS
Address 4696 DAVIS ROAD
City-State-Zip: LAKE WORTH FL 33461

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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: ANA DIAZ

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08/23/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|---------------------|
| Title | DIRECTOR |
| Name | OZUNA, GEORGE B |
| Address | 4696 DAVIS ROAD |
| City-State-Zip: | LAKE WORTH FL 33461 |