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DIVISION OF CORPORATIONS
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CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF STATE
General Services
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 724812 (3)

1. Corporation Name
HARMONY EDUCATION CENTER, INC.

Principal Place of Business Mailing Address
% 111 N. ORANGE AVE. SUITE 1100 ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **11/16/1972** 3a. Date of Last Report **04/26/1994**
4. FEI Number **59-1448961** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**BORNSTEIN, JEROME J.
1111 E. AMELIA STREET
ORLANDO FL 32805**

10. Name and Address of New Registered Agent
81 Name **CAROLE RAFT**
82 Street Address (P.O. Box Number is Not Acceptable) **7036 NANDINA LANE**
83
84 City **TAMARAC** FL 85 Zip Code **33321**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Carole Raft* DATE **2/13/95**
Signature, typed or printed name of registered agent and that of applicant. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	BESSEMER, HENRIETTA C.
STREET ADDRESS	376 WALKER ROAD
CITY - ST - ZIP	WAYNESVILLE, NC.
TITLE	VP
NAME	HOGAN, EVELYN
STREET ADDRESS	3700 CURRY FORD RD. S28
CITY - ST - ZIP	ORLANDO FL
TITLE	SD
NAME	HUBAL, GLEN
STREET ADDRESS	376 WALKER ROAD
CITY - ST - ZIP	WAYNESVILLE NC
TITLE	TD
NAME	AKERS, ROBERT, JR.
STREET ADDRESS	161 HOWELL ROAD
CITY - ST - ZIP	WAYNESVILLE NC
TITLE	D
NAME	WALTON, B.J.
STREET ADDRESS	161 HOWELL ROAD
CITY - ST - ZIP	WAYNESVILLE NC
TITLE	D
NAME	RAFT, CAROLE
STREET ADDRESS	7036 NANDINA LN
CITY - ST - ZIP	TAMARAC FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	7036
6.4 CITY - ST - ZIP	33321

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Carole Raft* **CAROLE RAFT** 2/13/95 305748-7600
SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR