

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1996 08:00 AM
Secretary of State

DOCUMENT # 724812 (3)

1. Corporation Name

HARMONY EDUCATION CENTER, INC.



Principal Place of Business

% 111 N. ORANGE AVE.
SUITE 1100
ORLANDO FL 32801

Mailing Address

% 111 N. ORANGE AVE.
SUITE 1100
ORLANDO FL 32801

3. Date Incorporated or Qualified
11/16/1972

3a. Date of Last Report
02/28/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAFT, CAROLE
7036 NANDINA LANE
TAMARAC FL 33321

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME BESSEMER, HENRIETTA C.
STREET ADDRESS 376 WALKER ROAD
CITY-ST-ZIP WAYNESVILLE, NC.

TITLE VP ☐ DELETE
NAME HOGAN, EVELYN
STREET ADDRESS 3700 CURRY FORD RD. S28
CITY-ST-ZIP ORLANDO FL

TITLE SD ☐ DELETE
NAME HUBAL, GLEN
STREET ADDRESS 376 WALKER ROAD
CITY-ST-ZIP WAYNESVILLE NC

TITLE TD ☐ DELETE
NAME AKERS, ROBERT, JR.
STREET ADDRESS 161 HOWELL ROAD
CITY-ST-ZIP WAYNESVILLE NC

TITLE D ☐ DELETE
NAME WALTON, B.J.
STREET ADDRESS 161 HOWELL ROAD
CITY-ST-ZIP WAYNESVILLE NC

TITLE D ☐ DELETE
NAME RAFT, CAROLE
STREET ADDRESS 7036 NANDINA LANE
CITY-ST-ZIP TAMARAC FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 119.07(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:

H. C. BESSEMER
H. C. Bessemer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-96

Date

Daytime Phone #

CR2E037 (12/95)