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May 01 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
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

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



3. Date Incorporated or Qualified

11/16/1972

4. FEI Number

59-1448961

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ 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

☐ DELETE

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 SANTANGELO, ANTONY
STREET ADDRESS 376 WALKER RD
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 LANE
CITY-ST-ZIP TAMARAC FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME Bessemer, Henrietta C.
1.3 STREET ADDRESS 240 Harmony Hill Lane
1.4 CITY-ST-ZIP Waynesville, N.C.

2.1 TITLE VP ☒ Change ☐ Addition

2.2 NAME Hogan, Evelyn
2.3 STREET ADDRESS 240 Harmony Hill Lane
2.4 CITY-ST-ZIP Waynesville, NC

3.1 TITLE SD ☒ Change ☐ Addition

3.2 NAME Hubal, Glen
3.3 STREET ADDRESS 158 Harmony Hill Lane
3.4 CITY-ST-ZIP Waynesville NC

4.1 TITLE TD ☒ Change ☐ Addition

4.2 NAME Santangelo, Antony
4.3 STREET ADDRESS 240 Harmony Hill Lane
4.4 CITY-ST-ZIP Waynesville NC

5.1 TITLE D ☐ Change ☐ Addition

5.2 NAME Walton, B.J.
5.3 STREET ADDRESS 161 Howell Road
5.4 CITY-ST-ZIP Waynesville NC

6.1 TITLE D ☐ Change ☐ Addition

6.2 NAME Raft, Carol
6.3 STREET ADDRESS 7036 Nandina Lane
6.4 CITY-ST-ZIP TAMARAC FL

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

S.C. Bessemer H.C. BESSEMER

4-21-98

704-451-1056

CR2E037 (10/97)