2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

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Jan 30, 2006 8:00 am Secretary of State **DOCUMENT # F93000000409** 01-30-2006 90066 024 ***150.00 1. Entity Name HARCOURT, INC. Principal Place of Business Mailing Address 6277 SEA HARBOR DR 6277 SEA HARBOR DR ORLANDO, FL 32821 ATTN: TAX DEPT ORLANDO, FL 32821 UŞ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01202006 Cha-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 13-1935377 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. \Box Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. VCSD TITLE ☐ Defete TITLE ☐ Addition ABRAMOWSKI, RICHARD G NAME NAME 6277 SEE HARBOR DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIF ORLANDO, FL 32887 CITY - ST- ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BAYERS, WILLIAM F NAME NAME STREET ADDRESS 2 NEWTON PLACE SUITE 350 3RD FLOOR STREET ADDRESS CITY-ST-ZIP NEWTON, MA 02458 CITY-ST-ZIP SYP/FINANCE TITLE Delete TITLE ☐ Change ✓ Addition FOWLER, JUDITH P NAME NAME RAYMOND D. FAGAN SEA HARBOR STREET ADDRESS 10801 NORTH MOPAC EXPWAY, BLDG 3 STREET ADDRESS CITY-ST-ZIF AUSTIN, TX 78759 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME BEEMAN, YVETTE A NAME 2 NEWTON PLACE SUITE 350 3RD FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEWTON, MA 02458 CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-7IP TITLE ☐ Defete TITLE Change ☐ Addition . . . NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7F CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED

Daytime Phone #

ATTACHMENT

Harcourt, Inc.
Directors, Officers Report
Document # F93000000409

40007103

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Directors, Officers Report
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