FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V54036**1. Corporation Name

(1)

HARMONY MANAGEMENT, INC.

Principal Plac % JOHN HAGE		% JOHN HAGI	Mailing Address % JOHN HAGERTY 4400 EL CONQUISTADOR PARKWAY BRADENTON FL 34210-4036							
BRADENTON F							3. Date Incorporated or Qualified			
2. Principal F	lace of Business	2a. Mailing A	ddress			4. FEI Number	1 00,		plied For	
21		26	***************************************			65-0350297		_ 	ot Applicable	
Suite, Apt.		27				5. Certificate of Status Di	esired 🗀	\$8.75 A Fee Re		
City & Stat	е	<u>├</u> ──	City & State			6. Election Campaign Fin	, press,	\$5.00		
23] Zip	Country	28 Zip		Country	,	Trust Fund Contributio		Added t		
24	25	η	29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
27		of Current Registered Agei		1 1		10. Name and Address of			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
ОДН	ERTY, JOHN			81	Name					
4400 EL CONQUISTADOR PARKWAY							····			
	DENTON FL 34282			82	Street	Address (P.O. Box Number is Not	Acceptable)		,	
•				83				******		
				84	City		FL	85 Zip (Code	
office or r agent. I a	egistered agent, or both, in m familiar with, and accept	the Style of Florida Such of the obligations of, Section 6	nange was auth 07,0505, Florida	orized by a Statutes	/ the corp s.	corporation submits this statemer poration's board of directors. I her required when reinstaling)	eby accept the appoint	changing its pintment as	s registered registered	
12.		CERS AND DIRECTORS	(1401E. No	13.	an signature	ADDITIONS/CHANGES	TO OFFICERS AND	DIRECTOR	S IN 12	
TITLE	VP		DELETE	1.1 TITLE		ADDITIONO/OF INNUES	TO OT TOLING AND	Change	Addition	
NAME	DELL'ARMI, DANIEL			1.2 NAME						
STREET ADDRESS	421 BAYSIDE LANE			1.3 STREET	ADDRESS					
CITY-ST-7IP	NOKOMIS FL			1.4 CITY - S	T-ZIP					
TITLE	D		DELETE	2.1 TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	dell'armi, penny s.			2.2 NAME						
STREET ADDRESS	421 BAYSIDE LANE			2.3 STREET	ADDRESS					
CITY-ST-ZIP	NOKOMIS FL			2. 4 CITY - 9	ST · ZIP					
1/TLE	DP		DELETE	3.1 TITLE				Change	Addition	
NAME	HAGERTY, JOHN			3.2 NAME						
STREET ADDRESS	612 HARBOR SHORE I	DR		3.3 STREET	ADDRESS					
CITY-ST-ZIF	NOKOMIS FL			3.4. CITY - 9	ST-ZIP					
TIFLE	D		DELETE	4.1 TITLE				Change	Addition	
NAME	HAGERTY, HELEN B.			4. 2 NAME						
STREET ADDRESS	612 HARBOR SHORE I	DR		4.3 STREET	ADDRESS					
CITY-ST-ZIP	NOKOMIS FL			4.4 CITY - S	T• ZIP					
TITLE			DELETE	5.1 TITLE				☐ Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIP				5.4 CITY - S	T-ZIP					
TITLE			DELETE	6.1 TITLE				Change	Addition	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREET	ADDRESS					

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

14. Loo 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaching mt with an address.

FILED

Jan 31 1997 8:00am

Secretary of State