

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000009031

Entity Name: HARMONY DEVELOPMENT CENTER, INC.**Current Principal Place of Business:**12233 SW 55TH ST
801
COOPER CITY, FL 33330**Current Mailing Address:**12233 SW 55TH ST
801
COOPER CITY, FL 33330 US**FEI Number:** 80-0004598**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOLDMAN, CHARLES J
601 S.FEDERAL HIGHWAY
HOLLYWOOD, FL 33020 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|----------------------------|
| Title | DIRECTOR |
| Name | COWO, ANA |
| Address | III ISLE OF VENICE DR 3 |
| City-State-Zip: | FORT LAUDERDALE FL 33301 |

| | |
|-----------------|-------------------------|
| Title | CEO |
| Name | MORENO, CYNTHIA |
| Address | 18300 NW 16 STREET |
| City-State-Zip: | PEMBROKE PINES FL 33029 |

| | |
|-----------------|------------------------|
| Title | DIRECTOR |
| Name | CAMPO-GOLDMAN, MYRIAM |
| Address | 2853 PALM AIRE |
| City-State-Zip: | POMPANO BEACH FL 33069 |

| | |
|-----------------|----------------------------|
| Title | DIRECTOR |
| Name | ALEXIS, MARJORIE |
| Address | 9371 NW 20TH PLACE |
| City-State-Zip: | SUNRISE FL 33322 |
| Title | DIRECTOR |
| Name | SIMMONDS, GLENNIS |
| Address | 5410 SW 148 AVE |
| City-State-Zip: | SOUTHWEST RANCHES FL 33330 |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CYNTHIA MORENO

CEO

03/20/2020

Electronic Signature of Signing Officer/Director Detail_____
Date