## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000111327

Entity Name: HARMONY BEHAVIORAL HEALTH, INC.

**Current Principal Place of Business:** 

8735 HENDERSON RD TAMPA, FL 33634

**Current Mailing Address:** 

8735 HENDERSON RD TAMPA, FL 33634

FEI Number: 20-3320236 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Apr 08, 2013

**Secretary of State** 

CC5989562905

## Officer/Director Detail:

Title	DIRECTOR, PRES, CEO	Title	DIRECTOR, CFO, T
Name	CUNNINGHAM, ALEC	Name	TRAN, THOMAS L
Address	8735 HENDERSON RD	Address	8735 HENDERSON RD
City-State-Zip:	TAMPA FL 33634	City-State-Zip:	TAMPA FL 33634

Title SECRETARY Title CHIEF ACCT OFFCR, AT Name IGLESIAS, LISA G Name HEBERT, MAURICE S Address 8735 HENDERSON RD Address 8735 HENDERSON ROAD

City-State-Zip: TAMPA FL 33634 City-State-Zip: TAMPA FL 33634

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LISA G IGLESIAS

**SECRETARY** 

04/08/2013