

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000103593

**Entity Name:** TABBYSTONE CO.

**Current Principal Place of Business:**

1120 CRESTWOOD ST.  
JACKSONVILLE, FL 32208

**Current Mailing Address:**

PO BOX 9535  
JACKSONVILLE, FL 32208-9535

**FEI Number:** 59-3756818

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PEPER, RICHARD C  
8833 PERIMETER PARK BLVD SUITE 602  
JACKSONVILLE, FL 32216 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 P  
Name MELANCON, JR., DEJEAN  
Address 664 BEACH AVENUE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title S T  
Name MELANCON, LAURIE  
Address 664 BEACH AVENUE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title OFFICE MANAGER  
Name MELANCON, MATTHEW A  
Address 1120 CRESTWOOD ST.  
City-State-Zip: JACKSONVILLE FL 32208

*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:** MATTHEW MELANCON

**OFFICE MANAGER**

**04/25/2014**

Electronic Signature of Signing Officer/Director Detail

Date