

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000103593

Entity Name: TABBYSTONE CO.

FILED
Mar 15, 2006
Secretary of State

Current Principal Place of Business:

1120 CRESTWOOD ST.
PO BOX 9535
JACKSONVILLE, FL 322089535

New Principal Place of Business:

Current Mailing Address:

1120 CRESTWOOD ST.
JACKSONVILLE, FL 322089535

New Mailing Address:

FEI Number: 59-3756818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEPER, RICHARD C
8833 PERIMETER PARK BLVD SUITE 602
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELANCON, JR., DEJEAN
Address: 675 BEACH AVENUE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MELANCON, JR., DEJEAN
Address: 675 BEACH AVENUE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: S T () Change (X) Addition
Name: MELANCON, LAURIE
Address: 675 BEACH AVENUE
City-St-Zip: ATLANTIC BEACH, FL 32233

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DEJEAN MELANCON JR

P

03/15/2006

Electronic Signature of Signing Officer or Director

Date