

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000087713

**Entity Name:** ABAIDE, INC.

**Current Principal Place of Business:**

5875 MINING TERRACE  
UNIT 206  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

5875 MINING TERRACE  
UNIT 206  
JACKSONVILLE, FL 32257 US

**FEI Number:** 46-4045710

**Certificate of Status Desired:** No

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

STONEBURNER, GRESHAM R  
841 PRUDENTIAL DRIVE, SUITE 1400  
JACKSONVILLE, FL 32207 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 D  
Name TOWERS, WILLIAM B III  
Address 1541 INGLESIDE AVENUE  
City-State-Zip: JACKSONVILLE FL 32205

Title D  
Name ROBERTS, SARAH T  
Address 11001 MERRICK DRIVE  
City-State-Zip: PEACHTREE CITY GA 30269

Title D  
Name TOWERS, KATHERINE A  
Address 1261 NECK ROAD  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title D  
Name BUNTING, HANNAH T  
Address 105 EAST GIDDEN AVENUE #8  
City-State-Zip: TAMPA FL 33603

*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:** WILLIAM B TOWERS, III

**DIRECTOR**

**04/14/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date