2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000084959

Entity Name: TRADITIONS OF ATLANTIC BEACH, INC.

Current Principal Place of Business:

1120 CRESTWOOD STREET JACKSONVILLE. FL 32208

Current Mailing Address:

PO BOX 9535

JACKSONVILLE, FL 32208

FEI Number: 59-3598411 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MELANCON, DEJEAN JR 664 BEACH AVENUE ATLANTIC BEACH, FL 32233 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 Feb 08, 2013

Secretary of State

CC7955849995

Officer/Director Detail:

Title PSTD Title VP,D

Name MELANCON, DEJEAN JR. Name SPINA, MARK

Address 664 BEACH AVENUE Address 1740 PARK TERRACE EAST

City-State-Zip: ATLANTIC BEACH FL 32233 City-State-Zip: ATLANTIC BEACH FL 32233

Title VPD

Name MELANCON, LAURIE Address 664 BEACH AVENUE

City-State-Zip: ATLANTIC BEACH FL 32233

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: DEJEAN MELANCON

PRESIDENT

02/08/2013

Electronic Signature of Signing Officer/Director Detail

Date