

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00520

Entity Name: LEE LESTER, INC.

FILED
Mar 02, 2008
Secretary of State

Current Principal Place of Business:

17570 SW 61 CT
C/O ORON LEE LESTER
FORT LAUDERDALE, FL 33331

Current Mailing Address:

17570 SW 61ST CT
C/O ORON LEE LESTER
FT LAUDERDALE, FL 33331 US

FEI Number: 59-2041128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESTER, ORON LEE
17570 SW 61ST CT
FT LAUDERDALE, FL 33331 US

New Principal Place of Business:

17570 SW 61 CT
C/O ORON LEE LESTER
SOUTH WEST RANCHES, FL 33331 US

New Mailing Address:

17570 SW 61ST CT
C/O ORON LEE LESTER
SOUTH WEST RANCHES, FL 33331 US

Name and Address of New Registered Agent:

LESTER, ORON LEE
17570 SW 61ST CT
SOUTH WEST RANCHES, FL 33331 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:

03/02/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LESTER, ORON LEE,
Address: 17570 SW 61 CT
City-St-Zip: FT LAUDERDALE, FL 33331

Title: DST () Delete
Name: LESTER, BARBARA,
Address: 17570 SW 61 CT
City-St-Zip: FT LAUDERDALE, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LESTER, ORON LEE,
Address: 17570 SW 61 CT
City-St-Zip: SOUTH WEST RANCHES, FL 33331 US

Title: DST (X) Change () Addition
Name: LESTER, BARBARA,
Address: 17570 SW 61 CT
City-St-Zip: SOUTH WEST RANCHES, FL 33331 US

I hereby certify that the information supplied with this filing does not qualify 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: ORON LEE LESTER

PRES

03/02/2008

Electronic Signature of Signing Officer or Director

Date