

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G59651

(1)

1. Corporation Name

LESTER ENTERPRISES, INC.

Principal Place of Business

720 S.E. 9TH PL.
GAINESVILLE FL 32601

Mailing Address

720 S.E. 9TH PL.
GAINESVILLE FL 32601-8056

97 SEP 30 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

09/15/1983

3a. Date of Last Report

06/04/1996

4. FEI Number

59-2349806

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ? ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HOEFT, JANET
720 S.E. 9TH PL.
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name

Hoeft, Janet

82 Street Address (P.O. Box Number is Not Acceptable)

5404 SW 78 Ter.

83

84 City

Gainesville

FL

85 Zip Code

32608

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Janet L. Hoeft

Janet L. Hoeft S.T.

7/15/97

Signature typed and printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
P LESTER, RICHARD
STREET ADDRESS
720 S.E. 9TH PL.
CITY-ST-ZIP
GAINESVILLE FL 32601

TITLE ☐ DELETE

NAME
V HOEFT, EDWIN
STREET ADDRESS
5404 S.W. 78TH TER.
CITY-ST-ZIP
GAINESVILLE FL 32608

TITLE ☐ DELETE

NAME
ST HOEFT, JANET
STREET ADDRESS
5404 S.W. 78TH TER.
CITY-ST-ZIP
GAINESVILLE FL 32608

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

100002310751-008

-10/02/97--01126--008

*****550.00 *****550.00

UB
10-1-97

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Janet L. Hoeft

Janet L. Hoeft 7/15/97 352/372-479

CR2E034 (9/96)