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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # G59651 1. Corporation Name

LESTER ENTERPRISES, INC.

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90175 048 ***150.00



Mailing Address Principal Place of Business 720 S.E. 9TH PL. 720 S.E. 9TH PL. GAINESVILLE FL 32601 GAINESVILLE FL 32601 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/15/1983 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2349806 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Country Zip This corporation owes the current year Intangible Zip 30 Personal Property Tax. 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HOEFT, JANET Street Address (P.O. Box Number is Not Acceptable) 5404 SW 78 TERR. GAINESVILLE FL 32608 83 City 85 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition ☐ DELETE 1.1 TITLE TITLE LESTER, RICHARD 1.2 NAME NAME 720 S.E. 9TH PL. 1.3 STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32601 1.4 CITY-ST-ZIP CITY-ST-ZIP [] Change ☐ Addition ☐ DELETE 2.1 TITLE TILE HOEFT, EDWIN 2.2 NAME NAME 5404 S.W. 78TH TER. 2.3 STREET ADDRESS STREET ADDRESS **GAINESVILLE FL 32608** 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE HOEFT, JANET 3.2 NAME NAME 5404 S.W. 78TH TER. 3.3 STREET ADDRESS STREET ADDRESS **GAINESVILLE FL 32608** 3.4. CITY-ST-ZIP CITY-ST-ZIF Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 51777F TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIF CITY-ST-ZIP 6.1 TITLE Addition DFI FTE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I 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 suppliemental 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, with all other like empowered

SIGNATURE: '

CITY-ST-ZIP

CR2E034 (11/98)