## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000033487

1. Entity Name
SAM LESTER CONSTRUCTION LLC



FILED Apr 28, 2008 08:00 AN Secretary of State

Principal Place of Business

3172 SE OVERBROOK DR. PORT SAINT LUCIE, FL 34952 Mailing Address

3172 SE OVERBROOK DR. PORT SAINT LUCIE, FL 34952



04282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
NOT APPLICABLE		Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	Additional guired

6. Name and Address of Current Registered Agent

HOTZ, FRANK E III 3172 SE OVERBROOK DR. PORT SAINT LUCIE, FL. 34952

## DO NOT WRITE IN THIS SPACE

FORT SAINT LOCIE, FL 34952		IN THIS SPACE		
	named entity submits this statement for the purpose of changing its registere ions of registered agent.	d office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered	Agent signature required when constating) DATE		
Fill After Ma	! NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75	05/20/08-80075-024 138.75		
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LESTER, SAM 2120 BROOKHAVEN PALM CITY, FL 34990			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LESTER, ROSE 2120 BROOKHAVEN PALM CITY, FL 34990			
THE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LESTER, MARK 6237 SW MOORE ST. PALM CITY, FL 34990	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOTZ, FRANK E III 3172 SE OVERBROOK DR. PORT SAINT LUCIE, FL 34952	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUNNING-HOTZ, PATRICIA 3172 SE OVERBROOK DR PORT SAINT LUCIE, FL 34952			
TITLE NAME STREET ADDRESS				

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-21-08

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Daytime Pho