

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000056354

FILED  
Feb 05, 2009  
Secretary of State

Entity Name: LAW OFFICES OF EDWARD T. LEFEVER, P.A.

**Current Principal Place of Business:**

1333 S E 25TH LOOP  
SUITE 101  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1870  
OCALA, FL 344781870

**New Mailing Address:**

FEI Number: 59-3653217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LEFEVER, EDWARD T  
1301 SOUTHEAST 73RD PLACE  
OCALA, FL 34480 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LEFEVER, EDWARD T  
Address: 1301 SE 73RD PL  
City-St-Zip: OCALA, FL 34480

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: LEFEVER, EDWARD T  
Address: 1301 SE 73RD PL  
City-St-Zip: OCALA, FL 34480

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: EDWARD T. LEFEVER

PRES

02/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date