

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000057502

Entity Name: STEPHEN P. LESTER DDS PA

FILED  
Jan 11, 2008  
Secretary of State

## Current Principal Place of Business:

104 E. PARK AVENUE  
EDGEWATER, FL 32132

## New Principal Place of Business:

## Current Mailing Address:

104 E. PARK AVENUE  
EDGEWATER, FL 32132

## New Mailing Address:

FEI Number: 58-1444312

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LESTER, STEPHEN P  
104 E. PARK AVENUE  
EDGEWATER, FL 32132 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: P ( ) Delete  
Name: LESTER, STEPHEN P  
Address: 410 QUAY ASSISI  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S ( ) Delete  
Name: WILLEFORD, RICK  
Address: 600 HOUZE WAY SUITE D-6  
City-St-Zip: ROSWELL, GA 300761433

Title: AS ( ) Delete  
Name: DELOACHE LESTER, CELESTE  
Address: 410 QUAY ASSISI  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T ( ) Delete  
Name: LESTER, STEPHEN P  
Address: 410 QUAY ASSISI  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CELESTE DELOACHE LESTERSEC.

SEC.

01/11/2008

Electronic Signature of Signing Officer or Director

Date