

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000057502

FILED  
Feb 10, 2010  
Secretary of State

Entity Name: STEPHEN P. LESTER DDS PA

**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  
Name: LESTER, STEPHEN P  
Address: 410 QUAY ASSISI  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: CELESTE DELOACHE LESTER

AS

02/10/2010

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

\_\_\_\_\_  
Date