2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000046768

FILED Apr 02, 2007 Secretary of State

Entity Na	me: LESSEN	ERGY SYSTEMS EAST, INC.		•		
Current P	rincipal Place	of Business:	New Principal Place of Business:			
P O BOX 1137 ZELLWOOD, FL 32789				6923 OSWEGO DRIVE MOUNT DORA, FL 32757		
Current Mailing Address:			New Mailing	New Mailing Address:		
P O BOX (PLYMOUT	543 TH, FL 32768					
FEI Number	: 54-2108365	FEI Number Applied For ()	FEI Number Not Applica	able () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address				ddress of New Registered Agent:		
6923 OSW	ON, ROBERT I VEGO DRIVE A, FL 32757	R US				
	named entity e of Florida.	submits this statement for the po	urpose of changing its r	registered office or registered agent, or both,		
SIGNATU	RE:					
	Electron	nic Signature of Registered Age	nt	Date		
Election Ca	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (ROBERSON, F P O BOX 1137 ZELLWOOD, F		Address: 69	O (X) Change () Addition ROBERSON, ROBERT R 9932 OSWEGO DRIVE MOUNT DORA, FL 32757		
Title:	D () Delete	Title:	() Change () Addition		

Name: ROBERSON, SUE B Address: 6932 OSWEGO DRIVE City-St-Zip: MT. DORA, FL 32575 ïtle: () Chang lame:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT R. ROBERSON PRES 04/02/2007