


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90267 012 ***138.75

DOCUMENT # L06000036943	
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1. Entity Name
DYNASTY ELITE, LLC

Principal Place of Business 2204 58TH AVENUE EAST BRADENTON, FL 34203	Mailing Address 2204 58TH AVENUE EAST BRADENTON, FL 34203
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03122008 Chg-LLC CR2E083 (12/06)

4. FEI Number

20-4661377

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DONIGER, RENA
2204 58TH AVENUE EAST
BRADENTON, FL 34203

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Rena Doniger

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/13/08

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE PRES	<input checked="" type="checkbox"/> Delete
NAME DONIGER, RENA J.	
STREET ADDRESS 2204 58TH AVENUE EAST	
CITY - ST - ZIP BRADENTON, FL 34203	

TITLE MGMR	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME DONIGER, RENA J.	
STREET ADDRESS 2204 58TH AVENUE EAST	
CITY - ST - ZIP BRADENTON, FL 34203	

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE MGMR	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME DONIGER, NEIL	
STREET ADDRESS 2204 58TH AVENUE EAST	
CITY - ST - ZIP BRADENTON, FL 34203	

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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CITY - ST - ZIP	

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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/13/08

Date

941 751 6693

Daytime Phone #