2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000066269

Entity Name: DYNASTY LIMOUSINE, INC.

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1224 PEMBROOKE ROAD

JACKSONVILLE, FL 32259 US

11857 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32223 US

Current Mailing Address: New Mailing Address:

1224 PEMBROOKE ROAD JACKSONVILLE, FL 32259 US

FEI Number: 59-3384261 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

FLEMING, ANNE

1224 PEMBROOKE ROAD

JACKSONVILLE, FL 32259

US

FLEMING, MADELINE A

1224 PEMBROOKE ROAD

JACKSONVILLE, FL 32259

US

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: MADELINE A. FLEMING 01/12/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: PRFS (X) Change () Addition Name: FLEMING, ANNE Name: FLEMING, MADELINE A 1224 PEMBROOKE ROAD 1224 PEMBROOKE ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 US City-St-Zip: JACKSONVILLE, FL 32259 US

Title: VP () Delete Title: VP (X) Change () Addition Name: FLEMING, PIERCE III Name: FLEMING, PIERCE C III

Address: 4048 LONCIERA LOOP Address: 4048 LONICERA LOOP
City-St-Zip: JACKSONVILLE, FL 32259 US City-St-Zip: JACKSONVILLE, FL 32259 US

Title: TREA () Delete Title: TREA (X) Change () Addition

 Name:
 FLEMING, MARY
 Name:
 FLEMING, MARY M

 Address:
 4048 LONCIERA LOOP
 Address:
 4048 LONICERA LOOP

 City-St-Zip:
 JACKSONVILLE, FL 32259 US
 City-St-Zip:
 JACKSONVILLE, FL 32259 US

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: PIERCE C. FLEMING VP 01/12/2009