## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000110440

DRYDEN, RICKEY R

DRYDEN, RICKEY R

242 BRIDLE PATH LANE

TREA

242 BRIDLE PATH LANE

ORMOND BEACH, FL 32174 US

ORMOND BEACH, FL 32174 US

( ) Delete

Name: Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

ntity Name: DRYDEN TRANSPORTATION MANAGEMENT, INC

FILED May 06, 2009 Secretary of State

Entity Nai	me: DRYDE	N IRANS	BPORTATION MANAC	JEMEN I,	INC.			
Current Principal Place of Business:					New Principal Place of Business:			
	E PATH LAN BEACH, FL		US		909 WEST DELAND, F	NEW YORI FL 32720	K AVENUE US	
Current M	lailing Addr	ess:			New Mailii	ng Address	<b>s:</b>	
	E PATH LAN BEACH, FL		US		909 WEST DELAND, F	NEW YORI FL 32720	K AVENUE US	
FEI Number	: 26-3905638	FEI Nu	mber Applied For()	FEI Nun	nber Not Appli	icable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current	Registered Agent:		Name and	Address of	f New Registered Agent:	
	ALMA SCOOTER I BEACH, FL		US					
The above in the State	named entity of Florida	y submits	this statement for the	purpose o	f changing it	s registered	d office or registered agent, or both	,
SIGNATUI	RE:							
	Electro	onic Signa	nture of Registered Ag	gent			Date	,
		. , . , .	.S., the corporation did rund Contribution ( ).	not receive t	he prior notice	е.		
OFFICER	S AND DIRE	CTORS:			ADDITION	S/CHANGE	S TO OFFICERS AND DIRECTO	RS:
Title: Name: Address: City-St-Zip:	DIR DRYDEN, RIG 242 BRIDLE ORMOND BE	PATH LANE			Title: Name: Address: City-St-Zip:	DRYDEN, RI 3815 SUNSE	(X) Change ( ) Addition ICKEY R ET COVE DRIVE IGE, FL 32129 US	
Title: Name: Address: City-St-Zip:	P ( DRYDEN, RIO 242 BRIDLE ORMOND BE	PATH LANE			Title: Name: Address: City-St-Zip:	DRYDEN, RI 3815 SUNSE	(X) Change () Addition ICKEY R ET COVE DRIVE IGE, FL 32129 US	
Title: Name: Address: City-St-Zip:	DRYDEN, RIG 242 BRIDLE ORMOND BE	PATH LANE ACH, FL 32			Title: Name: Address: City-St-Zip:	DRYDEN, RI 3815 SUNSE PORT ORAN	ET COVE DRIVE IGE, FL 32129 US	
Title:	SEC (	) Delete			Title:	SEC	(X) Change ( ) Addition	

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.

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

DRYDEN, RICKEY R

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TREA

3815 SUNSET COVE DRIVE

3815 SUNSET COVE DRIVE

PORT ORANGE, FL 32129 US

PORT ORANGE, FL 32129 US

(X) Change ( ) Addition

SIGNATURE: RICKEY R. DRYDEN PRES 05/06/2009