

2007 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 29, 2007
Secretary of State**

DOCUMENT# P97000046739

Entity Name: DYNASTY HOMES REALTY, INC.

Current Principal Place of Business:

82 GOLF VIEW DRIVE
OCALA, FL 34472 US

New Principal Place of Business:

Current Mailing Address:

82 GOLF VIEW DRIVE
OCALA, FL 34472 US

New Mailing Address:

FEI Number: 65-0021193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, CYSLYN C
82 GOLF VIEW DRIVE
OCALA, FL 34472 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: CYSLYN C MATTHEWS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATTHEWS, CYSLYN C
Address: 82 GOLF VIEW DRIVE
City-St-Zip: Ocala, FL 34472

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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City-St-Zip:

Title: () Delete
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City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MATTHEWS, CYSLYN C
Address: 82 GOLF VIEW DRIVE
City-St-Zip: Ocala, FL 34472 US

Title: D () Change (X) Addition
Name: CYSLYN C MATTHEWS,
Address: 82 GOLF VIEW DRIVE
City-St-Zip: Ocala, FL 34472 US

Title: D () Change (X) Addition
Name: CYSLYN C MATTHEWS,
Address: 82 GOLF VIEW DRIVE
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Title: D () Change (X) Addition
Name: CYSLYN C MATTHEWS,
Address: 82 GOLF VIEW DRIVE
City-St-Zip: Ocala, FL 34472 US

Title: D () Change (X) Addition
Name: CYSLYN C MATTHEWS,
Address: 82 GOLF VIEW DRIVE
City-St-Zip: Ocala, FL 34472 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: CYSLYN C MATTHEWS

D

11/29/2007

Electronic Signature of Signing Officer or Director

Date