FORM D RECEIVED

BEST AVAILABLE COPY

UNITED STATES

BECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FOR

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR **UNIT ORM LIMITED OFFERING EXEMPTION**

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| OMB APPR | OVAL |
| OMB Number. | 3235-0076 |
| Expires: | |
| Estimated averag | je burden |
| hours parmenon | 16.00 |

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| Name of Offering (| check if this is an amendment and name has changed, and indicate change.) | DD 0 0 0 0 0 |
| Filing Under (Check t | | ULOE PROCESSED |
| Type of Filing: | New Fifing Amendment | <u> </u> |
| | . A. BASIC IDENTIFICATION DATA | JAN 1 2 2007 |
| 1. Enter the inform | stion requested about the issuer | |
| Name of Issuer (| check if this is an amendment and name has changed, and indicate change.) | P THOMSON |
| Dynamic Leisure C | | FINANCIAL |
| Address of Executive | Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 5680A West Cypre | ss Street Tampa, Florida 33607 | (813) 877-6300 |
| Address of Principal E | | Telephone Number (Including Area Code) |
| | · | RECEIVED |
| Brief Description of B | usiness | 17 |
| Wholesale and inte | rnet Travel Operator | JAN - 8 2007 |
| Type of Business Orga | inization | |
| corporation business tru | | lease specify! 160 |
| <u>:</u> | Month Year | |
| Actual or Estimated D | ate of Incorporation or Organization: | nated , |
| Jurisdiction of Incorp. | ration or Organization; (Enter two-letter U.S. Postal Service abbreviation for State | |
| COMPANIA INCOMPA | CN for Canada; FN for other foreign jurisdiction) | <u> </u> |
| GENERAL INSTRU | . Tions | • |
| | luers making an offering of securities in reliance on an exemption under Regulation D o | or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. |
| 77d(6). | | • |
| and Exchange Commis | ie must be filed no later than 15 days after the first sale of securities in the offering. sion (SEC) on the earlier of the date it is received by the SEC at the address given by date it was mailed by United States registered or certified mail to that address. | |
| Where To File: U.S. S | l Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 201 | 549. <i>.</i> |
| | (5) copies of this notice must be filed with the SEC, one of which must be manually | |
| photocopies of the ma | itually signed copy or bear typed or printed signatures. | |
| | A new filing must contain all information requested. Amendments need only repoin requested in Part C, and any material changes from the information previously suppl EC. | |
| Filing Fee: There is a | no federal filing fee. | • |
| State: | | |
| | ed to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa | • |
| | dopted this form. Issuers relying on ULOE must file a separate notice with the S made. If a state requires the payment of a fee as a precondition to the claim for | |
| | This notice shall be filed in the appropriate states in accordance with state law. | |
| this notice and must l | e completed. | |
| | ATTENTION | |
| | lice in the appropriate states will not result in a loss of the federal ex | |
| appropriate fede | ral notice will not result in a loss of an available state exemption unle | ss such exemption is predictated on the |
| i inny or a recera | | |
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SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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| 2. Enter the inform | ation rec | queste | d for the f | ollowis | ıß: | | • | | 1 | | * | |
| Each prom | pter of th | ne issa | ier, if the i | ssuer h | ias been organized w | ithin | the past five years; | | ÷ | | | |
| Each benef | icial own | ier hav | ing the po | wer to | vote or dispose, or di | rect th | e vote or disposition | of, 10 | % or more o | facta | is of equity securities of the i | ssuci |
| Each execu | tive offic | cer an | d director | of corp | orate issuers and of | согра | rate general and man | aging | partners of | partne | ership issuers; and | |
| Each gener | al and m | anagi | ng partner | of part | nership issuers. | • | _ | | 1 | | | , |
| | <u> </u> | | | <u> </u> | <u> </u> | | | | - : | | <u>'</u> | |
| Check Box(es) that A | pply: | | Promoter | Z | Beneficial Owner | Ø | Executive Officer | Ø | Director | | General and/or Managing Partner | |
| Full Name (Last name Brandano, Daniel | i first, if | indiv | idual) | | | | • | | 1 | | . ! | |
| Business or Residenc 5680A West Cypro | | • | | | • | de) | • | | ; | | | |
| Check Box(cs) that A | pply: | | Promoter _. | | Beneficial Owner | | Executive Officer | Ø | Director | | General and/or Managing Partner | |
| Full Name (Last name Winston, Eric H. | first, if | indiv | idusi) | | | | | | • 1 | | i | |
| Business or Residence 5119 Residencia, N | ì | | | | t, City, State, Zip Co | de) | | | . ! | | | |
| Check Box(es) that A | | _ | Promoter | | Beneficial Owner | Ø | Executive Officer | | Director | | General and/or Managing Partner | |
| Full Name (Last name Osborne, Nigel P. | first, if | indiv | idual) | | , , , , , , , , , , , , , , , , , , , | | , | | , | |); ; | |
| Business or Residence | Addres | s (N | umber and | Street | t, City, State, Zip Co | de) | | | • • • • | - | | |
| 5680A West Cypre | i ss Stree | et, Ta | mpa FL | 33607 | : | | , | | t | | | |
| Check Box(es) that A | pply: | | Promoter | Ø | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner | |
| Full Name (Last name Diversified Acquisit | | • | idual) | | | | | | . ! | - | | |
| Business or Residence | Address | s (N | umber and | Street | , City, State, Zip Co | de) | | | | | | |
| c/o Warren Baker | Trustee | , 300 | Chesnut | Stree | t, Suite 200, Nee | dham | ı, MA | | 1. | | | |
| Check Box(es) that A | ply: | | Promoter | Ø | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner | |
| Full Name (Last name MMA Capital, LLC | 1 | indiv | dual) | | | | | | . , | | | |
| Business or Residence 2255 Challenger W | ı | | | | | de) | | - ··· | : | | | |
| Check Box(es) that A | oply: | <u> </u> | Promoter . | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner | |
| Full Name (Last name | first, if | indiv | dual) | | | | · | | 1 . | | | |
| Business or Residence | Address | (N | umber and | Street | , City, State, Zip Co | de) | | | | | 1 | |
| Check Box(es) that A | ply: | | Promoter | | Beneficial Owner | | Executive Officer | | Director | | General and/or Managing Partner | |
| Full Name (Last name | first, if | indivi | dual) | | | | • | , | | | 1 | |
| Business or Residence | Address | s (N | umber and | Street | , City, State, Zip Co | de) | | | , j | | 1 | |
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| 2. What | is the mi | nimum investr | nent that v | vill be acce | pted from | any individ | lual? | | | | | |
| ·3. Does | the offer | ng permit join | t ownersh | ip of a sing | gle unit? | | | ************** | ; ; | | Yes | No |
| 4. Enter | the info | mation reques | ted for eac | h person v | vho has bee | n or will b | be paid or | given, dire | ctly or ind | irectly, any | <i>i</i> . | |
| | | similar remund | | | | | | | | | | |
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| | | me first, if ind | ividual) | | | | | | 1 | | | |
| Bronson, | | | | | | | | | - i | | .1 | |
| | | ice Address (N | | d Street, C | ity, State, 2 | (ip Code) | • | ; | 1 | | .!. | :. |
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| States in V | Vhich Pe | son Listed Ha | s Solicited | or Intends | to Solicit | Purchasers | | | 1 | | ĺ. | |
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| ruli Name | (Last na | me first, if ind | ividual) | | | | | | | | l, · | |
| Business | or Reside | nce Address (1 | Number air | d Street, C | ity, State, | Zip Code) | | • . | i | | | |
| 37 | | D D - | -1 | | | - | | | | <u>:</u> | 1. | |
| Name of A | ssociated | Broker or De | aicr | | | •, | | | | • | 1 | |
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| RI | SC | | TN | TX | UT | VT | VA | WA | WV | WI | WY | PR |
| Full Name | (Last na | ne first, if ind | ividual) | | | | | · · · _ | <u>. :</u> | | : | ··· |
| | , | | • | • | | ~, , | | _ | | | E. | |
| Business | or Reside | nce Address (I | Number an | d Street, C | ity, State, | Zip Code) | | | | | | |
| Name of A | ssociated | Broker or De | aler | · | | | · | | 1 | | l _i , e | |
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| | | son Listed Ha | | | | | | | ! | • | <u> </u> | |
| (Chec | k "All St | ates" or check | individus | States) | | | | ************* | | ••••••••••••••••••••••••••••••••••••••• | □ Al | l States |
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| | | gate offering price of securities included in this offering and the total amount already | | |
|-----|--|--|--|--|
| | | if the answer is "none" or "zero." If the transaction is an exchange offering, cheel indicate in the columns below the amounts of the securities offered for exchange and | | |
| | aiready exchar | | • | |
| | Type of Se | curity | Aggregate Offering Price | Amount Alr Sold |
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| | | | s 0.00 | 0.00 |
| | Equity | ☐ Common ☐ Preferred | · | · • |
| | Convertible | e Securities (including warrants) | £ 7,500,000.00 | 7,500,00 |
| | | Interests | | \$ 0.00 |
| | • | cify) | | 0.00 |
| | | d | 8,500,000.00 | · ~—— |
| | . 100 | | 3 | 3 0,100,000 |
| | | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | | er of accredited and non-accredited investors who have purchased securities in this aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate | | |
| | | persons who have purchased securities and the aggregate dollar amount of their | | i |
| | purchases on th | e total lines. Enter "0" if answer is "none" or "zero." | | |
| | • | • | Number | Aggrega Dollar Ame |
| | | · | Investors | of Purcha |
| | Accredited | I Investors | 4 | \$ 600,000 |
| | Non-accre | dited Investors | 0 | \$ 0.00 |
| | To | al (for filings under Rule 504 only) | | s |
| | | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is f | or an offering under Rule 504 or 505, enter the information requested for all securities | i | |
| | | er, to date, in offerings of the types indicated, in the twelve (12) months prior to the | : | |
| | | | • | |
| | first sale of sec | urities in this offering. Classify securities by type listed in Part C — Question 1. | | |
| | | | Type of | |
| | Type of O | ffering | Security | Sold |
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| | response to Part C — Quest is difference is the "adjusted or proposed to be use known, furnish an estimate ted must equal the adjusted be above. SIGNATURE authorized person. If this recurities and Exchange Coursuant to paragraph (b)(2) | Payments to Officers, Directors, & Affiliates |

| we kind | SELECTION OF BUILDING ESTATE SIGNATURE TRANSPORTERS | | data da |
|---------|---|-------|------------------|
| | ty described in 17 CFR 230.262 presently subject to any of the disqualification of the disqualification | , Yes | i No ⊠ |
| | | _ | |

- See Appendix, Column 5, for state response.
- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| | <u>, , , , , , , , , , , , , , , , , , , </u> | |
|-----------------------------|---|----------|
| Issuer (Print or Type) | Signature | Date |
| Dynamic Leisure Corporation | 16.1 | 12/27/06 |
| Name (Print or Type) | Title (Print or Type) | 1 |
| Daniel G. Brandar o | Chief Executive Officer | |

Instruction:

Print the name and little of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| | (清章性) | 第101 章 | 是沙漠的地 | AP | PENDIX 4 | | | 4.54.14 | |
|-------|----------------------|--|--|--------------------------------|--|--|----------|---------|--|
| | to non-a investor | t to sell ccredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | 5 Disqualification under State ULOE (if yes, attach explanation of Waiver granted) (Part E-Item 1) | | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
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| | | | | ZAPP | NDIX : | | | | | | |
|-------|------------------------------|---|--|---|-------------|--|----------|-----|--|--|--|
| 1 | Inter- to non- investo | d to sell accredited rs in State 3-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | 4 Type of investor and amount purchased in State (Part C-Item 2) | | | | | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | |
| State | Yes | No | · | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | | |
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(2) Convertible Promissory Notes and Common Stock Warrants \$8,500,000

| . | to non-a | I to sell ceredited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | under St (if yes, explan waiver | lification ate ULOS attach ation of granted) -Item 1) | | | |
|-------|----------|--|--|--------------------------------------|--|--|-------------|-----|----|
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
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