


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000002530	
1. Entity Name RAC RR, INC.	

Principal Place of Business 5700 TENNYSON PARKWAY, THIRD FLOOR PLANO, TX 75024	Mailing Address 5700 TENNYSON PARKWAY, THIRD FLOOR PLANO, TX 75024
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DO NOT WRITE IN THIS SPACE



01172006 No Chg-P CR2E034 (11/05)

4. FEI Number
73-1702183

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

DATE
02/17/06 80009-022 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPEESE, MARK E 5700 TENNYSON PARKWAY, THIRD FLOOR PLANO, TX 75024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FADEL, MITCHELL E 5700 TENNYSON PARKWAY, THIRD FLOOR PLANO, TX 75024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KORST, CHRISTOPHER 5700 TENNYSON PARKWAY, THIRD FLOOR PLANO, TX 75024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAVIS, ROBERT D 5700 TENNYSON PARKWAY, THIRD FLOOR PLANO, TX 75024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS WALVERTON, DAWN 5700 TENNYSON PARKWAY, THIRD FLOOR PLANO, TX 75024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christopher Korst / CHRISTOPHER KORST 01/30/06 801-1111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone