

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013556

Entity Name: RAC ENTERPRISES, L.L.C.

FILED  
Mar 19, 2009  
Secretary of State

## Current Principal Place of Business:

1550 NORTH NOVA ROAD  
HOLLY HILL, FL 32117

## New Principal Place of Business:

## Current Mailing Address:

1550 NORTH NOVA ROAD  
HOLLY HILL, FL 32117

## New Mailing Address:

FEI Number: 20-0762467

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEVACQUA, MICHAEL R  
1550 NORTH NOVA ROAD  
HOLLY HILL, FL 32117 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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: RAPIER, DAVID  
Address: 3489 OAK KNOLL POINT  
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM ( ) Delete  
Name: MILLER, SANFORD  
Address: 444 SEABREEZE BLVD SUITE 1002  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: MGR ( ) Delete  
Name: BARRETT, CHARLES  
Address: 2607 AMBERGATE ROAD  
City-St-Zip: WINTER PARK, FL 32792

Title: MGR ( ) Delete  
Name: HOUSE, JEFFREY  
Address: 4433 WINDERWOOD CIRCLE  
City-St-Zip: ORLANDO, FL 32835

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID RAPIER

MGRM

03/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date