

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000004792

Entity Name: RAC, LLC

FILED
Jul 23, 2008
Secretary of State

Current Principal Place of Business:

9160 EQUUS CIRCLE
BOYNTON BEACH, FL 33437 US

New Principal Place of Business:

9160 EQUUS CIRCLE
BOYNTON BEACH, FL 33472 US

Current Mailing Address:

9160 EQUUS CIRCLE
BOYNTON BEACH, FL 33437 US

New Mailing Address:

9160 EQUUS CIRCLE
BOYNTON BEACH, FL 33472 US

FEI Number: 33-1129978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HURLEY, MATTHEW
9160 EQUUS CIRCLE
BOYNTON BEACH, FL 33437 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: HURLEY, MATTHEW
Address: 9160 EQUUS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: MGRM (X) Delete
Name: HURLEY, SHANNON
Address: 9160 EQUUS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HURLEY, MATTHEW
Address: 9160 EQUUS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472 US

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: MATTHEW HURLEY

MGR

07/23/2008

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