2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090757

Entity Name: GAE - RAC, LLC

Name:

Address:

City-St-Zip:

4691 DUSK CT.

JACKSONVILLE, FL 32207

FILED Apr 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4690 DUSK COURT JACKSONVILLE, FL 32207 **Current Mailing Address: New Mailing Address:** 4691 DUSK COURT JACKSONVILLE, FL 32207 FEI Number: 01-0874592 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HORENSTEIN, JOSHUA 4691 DUSK COURT JACKSONVILLE, FL 32207 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HORENSTEIN, JOSHUA Name: Name: Address: 4691 DUSK COURT Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: Title: () Delete () Change () Addition Name: STANLEY, SCOTT Name: Address: 4691 DUSK CT. Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: () Delete Title: () Change () Addition YOCOM, DONALD Name: Name: Address: 4691 DUSK CT. Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: () Delete Title: CPS Title: () Change () Addition HORENSTEIN, JANET

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOSHUA HORENSTEIN **MGRM** 04/18/2008