


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 18, 2008 8:00 am**  
**Secretary of State**

04-18-2008 90155 021 \*\*\*138.75

<b>DOCUMENT # M04000002068</b>	
1. Entity Name <b>RAC NATIONAL PRODUCT SERVICES, LLC</b>	

Principal Place of Business <b>5700 TENNYSON PARKWAY THIRD FLOOR PLANO, TX 75024</b>	Mailing Address <b>5700 TENNYSON PARKWAY THIRD FLOOR PLANO, TX 75024</b>
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**50004630**



2. Principal Place of Business - No P.O. Box # <b>5501 Headquarters Dr.</b>	3. Mailing Address <b>5501 Headquarters Dr.</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

04092008 Chg-LLC CR2E083 (12/06)

City & State <b>Plano, TX</b>	City & State <b>Plano, TX</b>
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4. FEI Number <b>42-1626381</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip <b>75024</b>	Cc <b>---</b>	Zip <b>75024</b>	Country
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
<b>FL</b>	


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) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>	<b>Make check payable to Florida Department of State</b>
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9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SPEESE, MARK E 5700 TENNYSON PARKWAY PLANO, TX 75024	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Speese, Mark E. 5501 Headquarters Dr Plano, TX 75024	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FADEL, MITCHELL E 5700 TENNYSON PARKWAY PLANO, TX 75024	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Fadel, Mitchell E. 5501 Headquarters Dr Plano, TX 75024	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my 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.

<b>SIGNATURE:</b> 	<b>MARK E. SPEESE</b> / 11/4/2008	<b>972-801-1312</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #