


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # M98000001428	
1. Entity Name MOON DANCE, LLC	

Principal Place of Business 3526 SPOTTSWOOD AVENUE MEMPHIS, TN 38111	Mailing Address 3526 SPOTTSWOOD AVENUE MEMPHIS, TN 38111
----------------------------------------------------------------------------	----------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



01042005No Chg-LLC CR2E083 (10/03)

4. FEI Number 62-1636969	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	
DOTSON, ALBERT E JR. 200 S. BISCAYNE, SUITE 2500 MIAMI, FL 33131	DO NOT WRITE IN THIS SPACE

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 _____


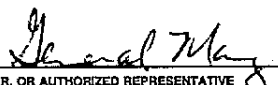
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEELBINDER, OSCAR W JR. 283 TILTON MEMPHIS, TN 38111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUBY AVENUE REALTY, LLC 1374 CORDOVA COVE #101 GERMANTOWN, TN 38138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBINSON, RICHARD 1317 HWY. 45 BYPASS JACKSON, MS 38305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MONTGOMERY, JOHN H 41 UNION AVE. MEMPHIS, TN 38103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U00000175336
01/10/05-80046-018 55.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:   Date: 1/7/05 Daytime Phone #: 901-377-7676

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE