

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002426

Entity Name: ROEDER & MOORE, LLC

FILED
Jun 30, 2005
Secretary of State

Current Principal Place of Business:

1210 ALLEGHANY STREET
CHARLOTTE, NC 28208

New Principal Place of Business:

Current Mailing Address:

1210 ALLEGHANY STREET
CHARLOTTE, NC 28208

New Mailing Address:

FEI Number: 56-2168348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Title: MGRM () Delete
Name: MOORE, WILLIAM III
Address: 4620 FOX THORNE DR.
City-St-Zip: CHARLOTTE, NC 28216

Title: MGR () Delete
Name: MOORE, WILLIAM JR
Address: 1348 MULLER ROAD
City-St-Zip: BLYTHEWOOD, SC 29016

Title: MGR () Delete
Name: HARRIS, MIKE
Address: 120 WAYSIDE DRIVE
City-St-Zip: WEST COLUMBIA, SC 29120

Title: MGR () Delete
Name: NORTHCUTT, HUGH
Address: 119 HIGH POINTE DRIVE
City-St-Zip: BLYTHEWOOD, SC 29016

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 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 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: WILLIAM M MOORE III

MGRM

06/30/2005

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