

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001442

FILED
Mar 01, 2005
Secretary of State

Entity Name: WELLS & WEST OF MURPHY, L.L.C.

Current Principal Place of Business:

1268 ANDREWS RD
MURPHY, NC 28906

New Principal Place of Business:

Current Mailing Address:

1268 ANDREWS RD
MURPHY, NC 28906

New Mailing Address:

FEI Number: 56-2036019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Title: MGRM () Delete
Name: WEST, CHARLES H JR
Address: PO BOX 129
City-St-Zip: MURPHY, NC 28906

Title: MGRM () Delete
Name: WELLS, WILLIAM R
Address: PO BOX 129
City-St-Zip: MURPHY, NC 28906

ADDITIONS/CHANGES:

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 ROY WELLS

MGMR

03/01/2005

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