

1.) CORPORATION NAME:

**Moseley Architects P.C.**

DUE DATE: **12/31/2011**

SCC ID NO: **01356971**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER  
ROBERT L MILLS  
3200 NORFOLK ST  
RICHMOND, VA 23230**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	30,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3200 NORFOLK STREET

CITY/ST/ZIP: RICHMOND, VA 23230-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JAMES N COPELAND  
TITLE: VICE PRESIDENT  
ADDRESS: 12200 THE GATES DRIVE  
CITY/ST/ZIP/CO: RALEIGH, NC 27614-

OFFICER

DIRECTOR

NAME: DANIEL R MACE  
TITLE: VICE PRESIDENT  
ADDRESS: 2100 LAKE FOREST DRIVE  
CITY/ST/ZIP/CO: TEGA CAY, SC 29708-

OFFICER

DIRECTOR

NAME: ROBERT L MILLS  
TITLE: DIRECTOR  
ADDRESS: 2340 MANAKINTOWN FERRY ROAD  
CITY/ST/ZIP/CO: MIDLOTHIAN, VA 23113-

OFFICER

DIRECTOR

NAME: S CARY GILL  
TITLE: VICE PRESIDENT  
ADDRESS: 1207 W 42ND ST  
CITY/ST/ZIP/CO: RICHMOND, VA 23225-

OFFICER

DIRECTOR

NAME: JOHN J MOORE III  
TITLE: VICE PRESIDENT  
ADDRESS: 3901 WEST FRANKLIN ST  
CITY/ST/ZIP/CO: RICHMOND, VA 23221-

OFFICER

DIRECTOR

NAME: STEWART D ROBERSON TITLE: PRESIDENT ADDRESS: 9133 SYCAMORE HILL PLACE CITY/ST/ZIP/CO: MECAHICSVILLE, VA 23116-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: JAMES M MCCALLA TITLE: VICE PRESIDENT ADDRESS: 16083 POUNCEY TRACT ROAD CITY/ST/ZIP/CO: ROCKVILLE, VA 23146-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: DOUGLAS D WESTMORELAND TITLE: VICE PRESIDENT ADDRESS: 9701 OLD COUNTRY TRACE CITY/ST/ZIP/CO: RICHMOND, VA 23238-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: GEORGE C NASIS TITLE: VICE PRESIDENT ADDRESS: 1601 ALLERSON LANE CITY/ST/ZIP/CO: VIRGINIA BEACH, VA 23455-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME: WILLIAM B LAUGHLIN TITLE: VICE PRESIDENT ADDRESS: 1802 SUMMIT VIEW PLACE CITY/ST/ZIP/CO: WAXHAW, NC 28173-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ ROBERT L MILLS	ROBERT L MILLS, DIRECTOR	12/29/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.