


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # F49914
1. Entity Name
ARCHITECTURAL CONCEPTS, INC.



Principal Place of Business Mailing Address
10225 ULMERTON RD. BLDG. 6A 10225 ULMERTON RD. BLDG. 6A
LARGO, FL 33771 US LARGO, FL 33771 US

DO NOT WRITE IN THIS SPACE



02212004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-2202917 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RUSS, ELBERT I JR
10225 ULMERTON RD
BLDG 6A
LARGO, FL 33771

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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 reissuing) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	RUSS, KARA
STREET ADDRESS	10225 ULMERTON ROAD, 6-A
CITY-ST-ZIP	LARGO, FL
TITLE	PD
NAME	RUSS, ELBERT I JR
STREET ADDRESS	10225 ULMERTON ROAD, 6-A
CITY-ST-ZIP	LARGO, FL
TITLE	VPD
NAME	LEMON, DANIEL
STREET ADDRESS	10225 ULMERTON ROAD, 6-A
CITY-ST-ZIP	LARGO, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/04/04-80051-015 150.00

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IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kara B. Russ Date: 4/30/04 Phone: 227-584-7178

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Phone #