2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F98000004701

1. Entity Name
VINING-SPARKS SECURITIES, INC.



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

Principal Place of Business

775 RIDGE LAKE BLVD. 2ND FLOOR MEMPHIS, TN 38120 Mailing Address

775 RIDGE LAKE BLVD. 2ND FLOOR MEMPHIS, TN 38120



DO NOT WRITE IN THIS SPACE

04302004 No Chg-P CR2E034 (10/03)

 4. FEI Number
 Applied For

 62-1112510
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WARD, ROBERT J 500 W. CYPRESS CREEK RD, SUITE 220 FT LAUDERDALE, FL 33309

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent.	urpose of changing its regis	stered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title t	applicable. (NOTE Regi	stered Agent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Fi Trust Fund Contributi		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CRY-ST-ZIP	CP VINING, JAMES L 775 RIDGE LAKE BLVD., 2ND FLOOF MEMPHIS, TN 38120	}			U00000152407 05/04/04-80086-006 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONWAY, W. MICHAEL 775 RIDGE LAKE BLVD., 2ND FLOOF MEMPHIS, TN 38120			· · · · -		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCOTT, FRANCIS J 8 775 RIDGE LAKE BLVD., 2ND FLOOR MEMPHIS, TN 38120			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LEVINGSTON, LARRY B 775 RIDGE LAKE BLVD., 2ND FLOOF MEMPHIS, TN 38120			IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE						

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 trustage 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 afforest, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NO THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2004

(901) 766-3000

Daytime Phone #