## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000115785

Entity Name: WORSHIP CONCEPTS, INC.

2235 SHADOW LAKES DRIVE

SARASOTA, FL 34240

Address:

City-St-Zip:

FILED Apr 27, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3231 GULF GATE DRIVE SUITE 201 SARASOTA, FL 34231 **New Mailing Address: Current Mailing Address:** 3231 GULF GATE DR. SUITE 201 SARASOTA, FL 34231 FEI Number: 04-3621105 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LUPER, ALBERT R 2235 SHADOW LAKES DRIVE SARASOTA, FL 34240 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LUPER, ALBERT R Name: Name: 2235 SHADOW LAKES DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34240 City-St-Zip: Title: **VPST** Title: () Change () Addition () Delete Name: LUPER, A. GAYLE 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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. GAYLE LUPER VPST 04/27/2004