
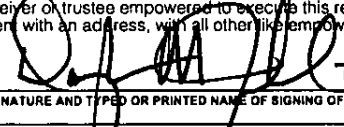


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2007 8:00 am
Secretary of State

04-06-2007 90048 039 ***150.00

DOCUMENT # 832848					
1. Entity Name B E & K, INC.					
Principal Place of Business 2000 INTERNATIONAL PARK DRIVE P. O. BOX 2332 BIRMINGHAM, AL 35243 US			Mailing Address 2000 INTERNATIONAL PARK DRIVE P. O. BOX 2332 BIRMINGHAM, AL 35243 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 63-0627338	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent	
Name				Name	
Street Address (P.O. Box Number is Not Acceptable)				Street Address (P.O. Box Number is Not Acceptable)	
City				City	
FL				Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GOODRICH, T.M.		NAME		
STREET ADDRESS	3320 DELL RD		STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL		CITY-ST-ZIP		
TITLE	VPCF	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SMITH, CLYDE M.		NAME		
STREET ADDRESS	2318 TWELVE OAKS DR		STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL 35244		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	JOEHL, DOUGLAS M		NAME		
STREET ADDRESS	108 MONTEVALLO LANE		STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL 35213		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CASSADY, G E III		NAME		
STREET ADDRESS	902 LINWOOD RD.		STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL 35222		CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SCHROEDER, DENNIS		NAME		
STREET ADDRESS	2000 INTERNATIONAL PRK DR		STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM, AL 35243		CITY-ST-ZIP		
TITLE	C	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CARRY, JOSEPH S		NAME	COMPTROLLER	
STREET ADDRESS	2000 INTERNATIONAL PRK DR		STREET ADDRESS	JOSEPH S. McCARTY	
CITY-ST-ZIP	BIRMINGHAM, AL 35243		CITY-ST-ZIP	2000 INTERNATIONAL PARK DR.	
				BIRMINGHAM AL 35243	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: X 			Date: 4/9/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone # (205) 972-6497		