## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 27, 2006-08:00 AM **DOCUMENT #847707 Secretary of State** ELK CORPORATION OF ALABAMA' Principal Place of Business Mailing Address 4600 STILLMAN BLVD. 4600 STILLMAN BLVD. TUSCALODSA, AL 35401 TUSCALOOSA, AL 35401 No Chg-P CR2E034 (11/05) 02202006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-1509396 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. DO NOT WRITE 2731 EXECUTIVE PARK DRIVE SUITE 4 IN THIS SPACE WESTON, FL 33331 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. Signature, typed or printed name of registered agent and fills it applicable. (NOTE, Registered Agant algorature required when restalating) DATE \$5.00 May Be 9. Election Cempaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. BILE NOWAK, RICHARD A NAME 14911 QUORUM DRIVE SUITE 600 STREET ADDRESS UUUUU449907 CITY-51-ZP **DALLAS, TX 75254** 03/03/06-80071-023 150.00 TITLE FALLS, J. GARY NAME STREET ADDRESS 4600 STILLMAN BLVD. CITY-ST-7P TUSCALOOSA, AL 35401 TIBE FISHER, GJ NAME 14911 QUORAM DRIVE SUITE 600 STREET ADDRESS DO NOT WRITE **DALLAS, TX 75254** CITY-57-2P IN THIS SPACE TITLE LITTLETON, BJ NAME STREET ADDRESS 4600 STILLMAN BLVD. CITY-ST-ZIP TUSCALOOSA, FL 35401 TITLE NAME STREET ADDRESS CTY-51-ZP TITLE

12. (hereby certify that the information supplied with this filling 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 ecceiver of 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 chapter, or on an attachment with an address, with all other like empowered.

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NAME STREET ADDRESS

NONATURE OF TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Daytime Phone €

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