

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State
 05-21-2002 90857 039 ***150.00

050701 AT

DOCUMENT # 847917

1. Entity Name
BE&K CONSTRUCTION COMPANY

Principal Place of Business
2000 INTERNATIONAL PARK DR.
P.O. BOX 2332 *TAX DEPT.
BIRMINGHAM AL 35243
US

Mailing Address
P. O. BOX 2332
C/O TAX DEPT.
BIRMINGHAM AL 35201
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
63-0797613

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **CEOD**
 STREET ADDRESS **GOODRICH, T. M.**
 CITY-ST-ZIP **3320 DELL RD.**
BIRMINGHAM AL 35223

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **CROSS, W. D.**
 CITY-ST-ZIP **2067 BANEBERRY DRIVE**
BIRMINGHAM AL 35244

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **VD**
 STREET ADDRESS **SMITH, CLYDE M.**
 CITY-ST-ZIP **2318 TWELVE OAKS DRIVE**
BIRMINGHAM AL 35244

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **CASSADY, E.G. III**
 CITY-ST-ZIP **902 LINWOOD RD**
BIRMINGHAM AL 35222

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **CD**
 STREET ADDRESS **KENNEDY, T. C.**
 CITY-ST-ZIP **4472 CLAIRMONT AVE.**
BIRMINGHAM AL 35222

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **JORHL, DOUGLAS**
 CITY-ST-ZIP **108 MONTEVALLO LANE**
BIRMINGHAM AL 35213

TITLE ☒ Change ☐ Addition
 NAME **JOEHL Doug.**
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (9/01)

SIGNATURE: X **SIGNATURE REQUIRED** **TREASURER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.23.02 (205) 972-6000

Date

Daytime Phone #