

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 217825

**FILED**  
**Oct 19, 2005**  
**Secretary of State**

**Entity Name:** PROSPERITY DREDGING CO INC

**Current Principal Place of Business:**

2221 MONET RD  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

3415 S.W. 96TH STREET  
STUART, FL 34997 US

**Current Mailing Address:**

C/O PRESSLY & PRESSLY, P.A.  
222 LAKEVIEW AVE., STE. 910  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

P.O. BOX 30369  
PALM BEACH GARDENS, FL 33420 US

**FEI Number:** 59-0857051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRESSLY, J. GRIER III  
222 LAKEVIEW AVE., STE. 910  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

MILLING, LISA D  
3415 S.W. 96TH STREET  
STUART, FL 34997 US

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: LISA D. MILLING

10/19/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MILLING, LISA  
Address: 2221 MONET RD  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: STD ( ) Delete  
Name: MILLING, DARREN  
Address: 2221 MONET RD  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MILLING, LISA  
Address: 3415 S.W. 96TH STREET  
City-St-Zip: STUART, FL 34997 US

Title: STD (X) Change ( ) Addition  
Name: MILLING, DARREN  
Address: 3415 S.W. 96TH STREET  
City-St-Zip: STUART, FL 34997 US

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: LISA D. MILLING

PRES

10/19/2005

Electronic Signature of Signing Officer or Director

Date