## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Corporatio	MENT # 807734 LAKES DREDGE & DOCK	` '			
Principal Plac	e of Business	Mailing Address			61611 81811 (B81
2122 YORK ROAD 21		2122 YORK ROAD			
OAK BROOK IL 60521 OAK BROOK IL 60521				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				11/02/1948	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		36-1163930	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		I B Controde of Status Desired 1 I	5 Additional
22		27 Oh 8 Chair		F66	Required
City & Stat	e	City & State			00 May Be ed to Fees
Zip	Country	28	Country	8. This corporation owes or has paid the current year	
24	25	<u>}</u> -1 '	ر اه	Personal Property Tax due June 30. Yes	□ No
	g. Name and Address of Curren			10. Name and Address of New Registered Agent	
CT	CORPORATION SYSTEM		<b>81</b> Na	ame	
1200 S. PINE ISLAND ROAD			<b>82</b> Str	reet Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324					
•			83		
			84 City	iy 85 2	ip Code
<u> </u>			1 1 1	· FL!	
office or r agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation Signalure, typed or printed name of registered age			med corporation submits this statement for the purpose of changin corporation's board of directors. I hereby accept the appointment	as registered
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS IN 12
TITLE	VTD	DELETE	1.1 TOTLE	☐ Chan	
NAME	BIEMECK, BRUCE J.		1.2 NAME		į
STREET ADDRESS	2122 YORK RD.		1.3 STREET ADDRE	ess	
CITY-ST-ZIP	OAK BROOK IL		1.4 CITY-ST-ZIP	·	
THTLE	PD	DELETE	2.1 TITLE	☐ Chan	ge Addition
NAME	MACKIE, DOUGLAS B.		2.2 NAME		
STREET ADDRESS	2122 YORK RD.		2.3 STREET ADDRE		
CITY - ST - ZIP	OAK BROOK IL SD	D briese	2. 4 CITY - ST - ZIP		4240
TITLE	THOMAS, MARK R.	DELETE	3.1 TITLE	L.J Chan	ge 🔲 Addition
NAME	2122 YORK ROAD		3.2 NAME		
STREET ADDRESS	OAK BROOK IL		3.3 STREET ADDRE		i
CITY-ST-ZIP TITLE	O'NI DIOONIL	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Chan	ge Addition
NAME		precie	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRE	NESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Chan	ge Addition
NAME	•		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRE	IESS	
CITY - ST - ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	☐ Chan	e Addition

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

Stuce Don HI PILL

APR 7 109

630:574-2949

**FILED** 

Apr 15 1998 8:00am

Secretary of State