2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2005 08:00 AN Secretary of State

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DOCUMENT # 807734 1. Entity Name GREAT LAKES DREDGE & DOCK COMPANY						
		<u> </u>	7885	4		
Principal Place 2122 YORK OAK BROOK		Meiling Address 2122 YORK ROAD OAK BROOK, IL 60521			1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ANTO NOVITO
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		Print American	The same of the sa	36-116		Not Applicable
		The state of the s	The British Control) <u> </u>		\$8.75 Additional
		and the second s	المحاورة والمساورة	5. Certificate	of Status Desired	Fee Required
	6. Name and Address of Current Re	egistered Agent				
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE			
	a named entity submits this statement for t tions of registered agent.	he purpose of changing its registere	ed office or register		th, in the State of Flori	
SIGNATURE.	Signature, typed or printed name of registered agent and	a tito il applicable. (NOTE: Registere	d Agent eignalure required	t when reinstating)	<u> </u>	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	ncing \$5.	.00 May Be ed to Fess	U0000 04/30/03	30347262 5-80107-016 150.00	
10.	OFFICERS AND D	RECTORS	Contract water w.	,, z · · · · · · · · · · · ·		
TITLE	(VTD					į
NAME	WENSEL, DEBORAH A					
STREET ADDRESS	2122 YORK RD.				·	
CITY-ST-ZIP	OAK BROOK, IL 60523		The same of the same		- 	· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MACKIE, DOUGLAS B. 2122 YORK RD. OAK BROOK, IL					
TITLE	SD			•	•	}
NAME	BRAUN, LESLIE A	~		+		{
STREET ADDRESS	2122 YORK ROAD	4		DO	NOT WE	->
CITY-ST-ZIP	OAK BROOK, IL 60523	· · · · · · · · · · · · · · · · · · ·	SECTION SECTION		TACT AAL	111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BURKE, ELLEN P 2122 YORK ROAD OAK BROOK, IL 60523	. · · · · · · · · · · · · · · · · · · ·		IN T	THIS SPA	ACE
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CITY-ST-ZIP	· · ·=··	- · · · <u>.</u> · · <u>.</u> · · ·		=्युर्वे क्षेत्र स्टब्स्ट कार्ये हो, ।		
12. 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 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 of 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: Tested - Brand 4/85/2015 620/574.2949 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/85/2015 Dallo Delytimo Priore 9						