2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005043

Address:

City-St-Zip:

848 DERBY DR

WEST CHESTER, PA 19380

FILED Jan 28, 2009 Secretary of State

Entity Na	me: MOBILE	DREDGING & PUMPING CO.			
Current Principal Place of Business:			New Principal Place of Business:		
	HEL ROAD R, PA 19013				
Current Mailing Address:			New Mailing Address:		
	HEL ROAD R, PA 19013				
FEI Number	: 23-1644245	FEI Number Applied For()	FEI Number Not App	icable () Certificate of Status	Desired (X)
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
1200 SOU	PORATION SY TH PINE ISLA ION, FL 33324	ND ROAD			
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered office or registered a	agent, or both,
SIGNATUI	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D (HARRIS, HOW 1401 N. CREE CHADDS FORI	K ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (VETTER, JERF 341 OXFORD I NORRISTOWN	ROAD	Title: Name: Address: City-St-Zip:	P (X) Change () Addition VETTER, JERRY 341 OXFORD ROAD PLYMOUTH MEETING, PA 19462	
Title: Name: Address: City-St-Zip:	S (WAYMAN, GAI 1601 KINGS H COATSVILLE,	GHWAY	Title: Name: Address: City-St-Zip:	S (X) Change () Addition WAYMAN, GAIL 1601 KINGS HIGHWAY COATSVILLE, PA 19320	
Title: Name: Address: City-St-Zip:	T (LETTON III, JA 619 MORGAN , PALMYRA, NJ		Title: Name: Address: City-St-Zip:	T (X) Change () Addition LETTON III, JAMES M 619 MORGAN AVE PALMYRA, NJ 08065	
Title: Name:	VP (GRESS, ROBE) Delete RT J	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Address:

City-St-Zip:

SIGNATURE: JAMES M. LETTON III Τ 01/28/2009