

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90020 029 ****50.00

DOCUMENT # M02000003135

1. Entity Name
BEAN DREDGING L.L.C.



Principal Place of Business
**1055 ST. CHARLES AVE.
SUITE 500
NEW ORLEANS, LA 70130**

Mailing Address
**1055 ST. CHARLES AVE.
SUITE 500
NEW ORLEANS, LA 70130**

DO NOT WRITE IN THIS SPACE



03312004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
72-0823793

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BEAN, JAMES W
STREET ADDRESS	1055 ST. CHARLES AVE.
CITY-ST-ZIP	NEW ORLEANS, LA 70130
TITLE	MGR
NAME	ROMERO, H.J. II
STREET ADDRESS	1055 ST. CHARLES AVE.
CITY-ST-ZIP	NEW ORLEANS, LA 70130
TITLE	MGR
NAME	ASHY, WILLIAM J
STREET ADDRESS	P.O. BOX 51857
CITY-ST-ZIP	LA FAYETTE, LA 70503
TITLE	MGR
NAME	RESO, JEROME J JR.
STREET ADDRESS	2200 ENERGY CENTRE 1100 POYDRAS
CITY-ST-ZIP	NEW ORLEANS, LA 701632200
TITLE	MGR
NAME	BEAN JR., JAMES W.
STREET ADDRESS	1055 ST. CHARLES AVE.
CITY-ST-ZIP	N.O., LA 70130
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *James W. Bean Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/12/04 504-587-8600

Date

Daytime Phone #