2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002507

742 FISHERMANS WHARF

FT MYERS BEACH, FL 33931 US

Address: City-St-Zip: FILED Apr 24, 2009 Secretary of State

Entity Nam	ie: DOLAN	MARINE CONSTRUCTION, INC.		•	
Current Principal Place of Business:			New Principal	New Principal Place of Business:	
12951 IONA FT MYERS,					
Current Mailing Address:			New Mailing #	New Mailing Address:	
12951 IONA ROAD FT MYERS, FL 33908					
FEI Number:	04-3586456	FEI Number Applied For ()	FEI Number Not Applicable	e () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Add	Name and Address of New Registered Agent:	
TAX ACCOUNTING & FINANCIAL ASSOCIATES, INC 809 WALKERBILT ROAD SUITE 5 NAPLES, FL 34110 US			3365 WOODS 104	TAX & FINANCIAL STRATEGISTS, LLC 3365 WOODS EDGE CIRCLE 104 BONITA SPRINGS, FL 34134 US	
The above in the State		y submits this statement for the pu	rpose of changing its re	gistered office or registered agent, or both,	
SIGNATURE: THOMAS WANDERON				04/24/2009	
Electronic Signature of Registered Agent			t	Date	
Election Cam	paign Financ	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP DOLAN, MAT 12951 IONA FT MYERS, I	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPT DOLAN, MAT 12951 IONA FT MYERS, I	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S DOLAN, MIC	()Delete HAEL 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: MATTHEW DOLAN P 04/24/2009