

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 313573

Entity Name: ORION MARINE CONSTRUCTION, INC.**Current Principal Place of Business:**5440 W. TYSON AVE
TAMPA, FL 33611**Current Mailing Address:**12000 AEROSPACE AVE,
SUITE 300
HOUSTON, TX 77034 US**FEI Number:** 59-1158596**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title CHAIRMAN, PRESIDENT & CHIEF
EXECUTIVE OFFICER
Name STAUFFER, MARK R
Address 12000 AEROSPACE AVE, SUITE 300
City-State-Zip: HOUSTON TX 77034

Title SVP
Name LEWIS, ROBERT W.
Address 12550 FUQUA STREET
City-State-Zip: HOUSTON TX 77034

Title VP, CHIEF FINANCIAL OFFICER AND
TREASURER
Name DEALMEIDA, CHRISTOPHER J.
Address 12000 AEROSPACE AVE,
SUITE 300
City-State-Zip: HOUSTON TX 77034

Title ASST. SECRETARY
Name GILBERT, MELISSA A.
Address 840 BAYOU PINES EAST
City-State-Zip: LAKE CHARLES LA 70601

Title EXECUTIVE VICE PRESIDENT, CHIEF
ADMINISTRATIVE OFFICER,
GENERAL COUNSEL & SECRETARY
Name BUCHLER, PETER R
Address 12000 AEROSPACE AVE, SUITE 300
City-State-Zip: HOUSTON TX 77034

Title VP
Name MICKLE, BRUCE A.
Address 1112 BROADWAY
City-State-Zip: PORT LAVACA TX 77979

Title ASST. SECRETARY
Name SIMPSON, LAURIE A.
Address 5440 W. TYSON AVE
City-State-Zip: TAMPA FL 33611

Title ASST. SECRETARY
Name LAQUAY, ALANA F.
Address 1112 BROADWAY
City-State-Zip: PORT LAVACA TX 77979

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I hereby 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 all other like empowered.

SIGNATURE: SANDRA GREENE**ASSISTANT SECRETARY** 01/10/2017_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title EVP & COO
Name BREAU, L. DWAYNE
Address 12000 AEROSPACE AVENUE
300
City-State-Zip: HOUSTON TX 77034

Title SVP
Name MANNINO, ANDREW C.
Address 5440 W. TYSON AVE
City-State-Zip: TAMPA FL 33611

Title ASSISTANT SECRETARY
Name ADAIR, RYAN P
Address 5440 W. TYSON AVE
City-State-Zip: TAMPA FL 33611

Title ASSISTANT SECRETARY
Name WILLIAMS, DANIEL L
Address 5440 W. TYSON AVE
City-State-Zip: TAMPA FL 33611

Title ASSISTANT SECRETARY
Name GREENE, SANDRA
Address 12000 AEROSPACE AVENUE
300
City-State-Zip: HOUSTON TX 77034

Title SVP
Name SLIDER, MARK D
Address 5440 W. TYSON AVE
City-State-Zip: TAMPA FL 33611

Title ASSISTANT SECRETARY
Name SAYRE, LISA J
Address 5440 W. TYSON AVE
City-State-Zip: TAMPA FL 33611