


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # M96000000081
1. Entity Name
LIGHTSHIP TANKERS V LLC



Principal Place of Business: 2200 ELLER DRIVE, BUILDING 27, PORT EVERGLADES STATION, FT. LAUDERDALE, FL 33316
Mailing Address: 2200 ELLER DRIVE, P.O. BOX 13038 - LEGAL DEPARTMENT, FT. LAUDERDALE, FL 33316



01112005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0643547	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
FINCH, STEPHEN B JR.
C/O SEABULK INTERNATIONAL, INC.
2200 ELLER DRIVE, BUILDING 27
FORT LAUDERDALE, FL 33316

**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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KURZ, GERHARD E 2200 ELLER DRIVE, BLDG. 27 PT EVERGLADES STA, FT LAUD, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TWAITS, ALAN R 2200 ELLER DRIVE, BLDG. 27 PT EVERGLADES STA, FT LAUD, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FINCH, STEPHEN B JR 2200 ELLER DRIVE, BLDG. 27 PT EVERGLADES STA, FT LAUD, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WILLRICH, L. STEPHEN 2200 ELLER DRIVE, BLDG. 27 PT EVERGLADES STA, FT LAUD, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DESOSTOA, VINCENT J 2200 ELLER DRIVE, BLDG. 27 FT LAUDERDALE, FL 33316
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

00000332117
04/26/05-80045-015 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: SB Finch Stephen B. Finch 4/18/05 954-523-2200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #