

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019221

Entity Name: SEABULK TOWING SERVICES, INC.**Current Principal Place of Business:**2200 ELLER DRIVE
FT LAUDERDALE, FL 33324**Current Mailing Address:**P O BOX 13038
ATTN: LEGAL DEPARTMENT
FORT LAUDERDALE, FL 33316 US**FEI Number: 76-0565247****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT/DIRECTOR
Name	FABRIKANT, ERIC
Address	2200 ELLER DRIVE, P.O. BOX 13038
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	SVP
Name	THOROGOOD, DANIEL J
Address	2200 ELLER DRIVE, P.O. BOX 13038
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	VP/TREASURER/DIRECTOR
Name	CENAC, MATTHEW
Address	2200 ELLER DRIVE, P.O. BOX 13038
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	VP
Name	WILLIAMS, JEFF
Address	7200 HIGHWAY 87
City-State-Zip:	PORT ARTHUR TX 77642

Title	VP/SECRETARY
Name	MANEKIN, LISA
Address	2200 ELLER DRIVE, P.O. BOX 13038
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	COO
Name	GROEN, RICK
Address	2200 ELLER DRIVE, P O BOX 13038
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	VP
Name	SEDLACEK, CHRISTOPHER
Address	2200 ELLER DRIVE, PO BOX 13038
City-State-Zip:	FT LAUDERDALE FL 33324

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: LISA MANEKIN**VP/SECRETARY****04/23/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date