2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M96000000081

Entity Name: LIGHTSHIP TANKERS V LLC

Current Principal Place of Business:

2200 ELLER DRIVE

FORT LAUDERDALE, FL 33316

Current Mailing Address:

P.O. BOX 13038

ATTN: LEGAL DEPARTMENT

FORT LAUDERDALE, FL 33316 US

FEI Number: 65-0643547 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

FILED Apr 04, 2022

Secretary of State

7677434883CC

Authorized Person(s) Detail:

Title MANAGER Title PRESIDENT

Name FABRIKANT, ERIC Name THOROGOOD, DANIEL J

Address 2200 ELLER DRIVE Address 2200 ELLER DRIVE

City-State-Zip: FORT LAUDERDALE FL 33316 City-State-Zip: FORT LAUDERDALE FL 33316

Title VICE PRESIDENT Title VP/SECRETARY/MANAGER

Name DEL REY, JORGE Name MANEKIN, LISA

Address 2200 ELLER DRIVE Address 2200 ELLER DRIVE

City-State-Zip: FORT LAUDERDALE FL 33316 City-State-Zip: FORT LAUDERDALE FL 33316

Title VP/TREASURER/MANAGER Title MANAGER

Name WEINS, BRUCE Name WEBER, SCOTT

Address 2200 ELLER DRIVE Address 2200 ELLER DRIVE

City-State-Zip: FORT LAUDERDALE FL 33316 City-State-Zip: FORT LAUDERDALE FL 33316

Title VICE PRESIDENT

Name LONG, WILLIAM C

Address 2200 ELLER DRIVE

City-State-Zip: FORT LAUDERDALE FL 33316

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRUCE WEINS VP/TREASURER 04/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date