


# 2000 UNIFORM BUSINESS REPORT (UBR)

UNIFORM BUSINESS REPORT

DOCUMENT # **A02063**

1. Entity Name  
**SEABULK TANKERS, LTD.**

**FILED** 4/24/24  
00 APR 19 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



Principal Place of Business  
P.O. BOX 13038  
FT LAUDERDALE FL 33316

Mailing Address  
P.O. BOX 13038  
FT LAUDERDALE FL 33316-0100

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

*ATTN: Legal Dept.*

4. FEI Number **59-1444561** Applied For Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~NAME: ROBERT X  
2200 ELLER DR X  
FT LAUDERDALE FL 33316 X~~

7. Name and Address of New Registered Agent

Name **Walton S. Kinsey, Jr.**  
Street Address (P.O. Box Number is Not Acceptable) **2200 Eller Drive, Bldg. 27**  
City **Fort Lauderdale** **FL** Zip Code **33316**

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.

SIGNATURE *Walton S. Kinsey, Jr.* **Walton S. Kinsey, Jr.** DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$42,758,534.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$86,812,383.00**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	<b>F38963 HVIDE MARINE TRANSPORT, INCORPORATED <del>2200 ELLER DR</del> FT. LAUDERDALE FL 33316</b>	STREET ADDRESS CITY - ST - ZIP	<b>2200 Eller Drive, P.O. Box 13038</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	<b>000003214720--9 -04/19/00--01066--006 ***2285.00 ****535.00</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	<b>FF \$526.25</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Walton S. Kinsey, Jr.* **WALTON S. KINSEY, SR. SECRETARY** Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E003 (9/99)