

2001 UNIFORM BUSINESS REPORT (UBR)

0006677 AF

DOCUMENT # A02063
 1. Entity Name
SEABULK TANKERS, LTD.

FILED
 01 APR 13 PM 12:36

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Handwritten mark

Principal Place of Business: P.O. BOX 13038 FT LAUDERDALE FL 33316
 Mailing Address: ATTN: LEGAL DEPT. PO BOX 13038 FT. LAUDERDALE FL 33316-0100



2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
 Zip Country

4. FEI Number **59-1444561**
 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
~~KINSEY, WALTON G JR~~
 2200 ELLER DR., BLDG. 27
 FT. LAUDERDALE FL 33316

7. Name and Address of New Registered Agent
 Name: **ALAN R. TWAITS**
 Street Address (P.O. Box Number is Not Acceptable)
 City: **FL** Zip Code

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: *Alan R. Twaits* **ALAN R. TWAITS** DATE: **3/27/01**
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. **\$86,812,383.00**
 10. Amount of Capital Contributions in FLORIDA to date.
 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	
DOCUMENT #	F38963
NAME	HVIDE MARINE TRANSPORT, INCORPORATED
STREET ADDRESS	2200 ELLER DR., PO BOX 13038
CITY-ST-ZIP	FT. LAUDERDALE FL 33316
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
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STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	800004036238--8
	-04/20/01--01104--001
	***526.25 ***526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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: *Stephen B. Finch* **STEPHEN B. FINCH, VP+SEC.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date: **3/28/01** Daytime Phone #: **954 523-2200**

CR2E003 (11/00)