

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90522 016 ***150.00

0347531 AV

DOCUMENT # F38963

1. Entity Name

SEABULK TRANSPORT, INC.



Principal Place of Business

**2200 ELLER DRIVE
BLDG 27-LEGAL DEPT
FORT LAUDERDALE FL 33316**

Mailing Address

**P.O BOX 13038
ATTN:LEGAL DEPT
FORT LAUDERDALE FL 33316**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2120296

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TWAITS, ALAN R
2200 ELLER DRIVE
FT. LAUDERDALE FL 33316**

Name

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	COBP	<input type="checkbox"/> Delete
NAME	KURZ, GERHARD E CEO	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	
TITLE	SVP	<input checked="" type="checkbox"/> Delete
NAME	BRAUNINGER, ANDREW W	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	
TITLE	VP	<input type="checkbox"/> Delete
NAME	TWAITS, ALAN R	
STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	FINCH, STEPHEN B	
STREET ADDRESS	2200 ELLER DR	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	SVP/T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	deSostoa, Vincent J.	
STREET ADDRESS	2200 Eller Dr.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33316	
TITLE	SVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Francois, Larry D.	
STREET ADDRESS	2200 Eller Dr.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33316	
TITLE	SVP/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Twaits, Alan R.	
STREET ADDRESS	2200 Eller Dr.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33316	
TITLE	VP/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Finch, Stephen B.	
STREET ADDRESS	2200 Eller Dr.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33316	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Alan R. Twaits, Senior Vice President

4/23/03

Date

(954) 523-2200

Daytime Phone #

CR2E034 (10/02)