

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
Tallahassee, FL 32399-0400

APPROVED
FEB 1996

DOCUMENT # F93000002143 (6)

SEACOR SERVICES, INC.

Principal Office Address

308 HARPER DR
SUITE 205
MOORESTOWN PA 08057
US

Mailing Address

1818 MARKET ST
PHILADELPHIA PA 19103
US

DO NOT WRITE IN THIS SPACE

3. Filing Date (Approved for Qualification)	3a. Date of Last Report
04/30/1993	05/01/1994
4. FEI Number	Applied For / Not Applicable
22-2938061	
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing / Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation has liability for information furnished to 1993/1994 Florida Statutes	Yes / No

2. Filing Date (First Filing)	2a. Mailing Address
21	26
22	27
23	28
24	29
25	30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
C T CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code

11. Pursuant to the provisions of Sections 607 (c)(2) and 607 (1)(b) Florida Statutes, the above named corporation hereby, this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607 (b)(2), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	PD EAGLE, KEVIN 200-E PARK DR., SUITE 600 MT. LAUREL NJ	1 NAME	☐ Change ☐ Addition
STREET ADDRESS		2 NAME	
CITY, ST, ZIP		3 STREET ADDRESS	
NAME	VPD HYATT, PHILLIP S 200 E. PARK DR., STE. 600 MT. LAUREL NJ 08065	4 CITY, ST, ZIP	☒ Change ☐ Addition
STREET ADDRESS		5 NAME	
CITY, ST, ZIP		6 STREET ADDRESS	
NAME	T GARDNER, LAWRENCE 200 E. PARK DR., STE. 600 MT. LAUREL NJ	7 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		8 NAME	
CITY, ST, ZIP		9 STREET ADDRESS	
NAME	S HILL, GREGORY S 280 KING OF PRUSSIA RD. RADNOR PA 19087	10 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		11 NAME	
CITY, ST, ZIP		12 STREET ADDRESS	
NAME	AT FOLLMAN, JOHN P 1818 MARKETING ST., 22 FLOOR PHILADELPHIA PA 19103	13 CITY, ST, ZIP	☐ Change ☐ Addition
STREET ADDRESS		14 NAME	
CITY, ST, ZIP		15 STREET ADDRESS	
NAME	ASSI TREASURER KAZEN PINK 1818 Market Street Philadelphia PA 19103	16 CITY, ST, ZIP	☐ Change ☒ Addition
STREET ADDRESS		17 NAME	
CITY, ST, ZIP		18 STREET ADDRESS	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and there is no penalty for this information stated in Sections 330.07(3)(b), Florida Statutes. I further certify that this information was filed on this change report or supplemental annual report as true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director for the corporation or the secretary or trustee empowered to execute this report as required by Chapter 330, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an other report with an address.

SIGNATURE: *[Signature]* **ASSI TREASURER**
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR
7/1/95 215 499-8074