

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000011159

1. Entity Name

SEACOR, LLC



Principal Place of Business

22 PEACHTREE STREET
BIRMINGHAM, AL 35213

Mailing Address

22 PEACHTREE STREET
BIRMINGHAM, AL 35213

DO NOT WRITE IN THIS SPACE



04062005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

57-1162851

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WATSON, FRANKLIN H PA
5365 E. COUNTY HWY. 30A, STE. 105
SEAGROVE BEACH, FL 32459

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
TILL, KENNETH W
22 PEACHTREE STREET
BIRMINGHAM, AL 35213

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
JACKSON, RONALD C
4788 SANDPIPER LANE
BIRMINGHAM, AL 35244

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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04/15/05-80057-024 50.00

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IN THIS SPACE**

11. 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 managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #