

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

APPROVED  
AND  
FILED

05 MAY 11 AM 8:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L03000043048

1. Entity Name  
SYKES MARINE HOLDINGS, LLC



Principal Place of Business  
~~11501 ELLISON WILSON RD~~  
~~PALM BEACH GARDENS, FL 33410~~

Mailing Address  
~~11501 ELLISON WILSON RD~~  
~~PALM BEACH GARDENS, FL 33410~~

2. Principal Place of Business  
333 East 24<sup>th</sup> St  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 1043  
Suite, Apt. #, etc.



04282005 Chg-LLC CR2E083 (10/03)

MRD

City & State  
Riviera Beach FL

City & State  
Palm Beach FL

4. FEI Number  
20-1399448

Applied For  
Not Applicable

Zip 33404

Country

Zip 33480

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

## 6. Name and Address of Current Registered Agent

KENNEDY, PAUL ROGERS  
~~11891 U.S. HIGHWAY ONE~~  
~~STE 100~~  
~~NORTH PALM BEACH, FL 33408~~

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
250 NE 12<sup>th</sup> Street

City Delray Beach FL Zip Code 33444

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

4/29/05

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

Make check payable to  
Florida Department of State

## 9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME SYKES, BG ☐ Delete  
STREET ADDRESS 300 EAST 23TH ST  
CITY - ST - ZIP WEST PALM BEACH, FL

## 10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 333 EAST 24<sup>th</sup> ST  
CITY - ST - ZIP Riviera Beach FL 33404

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 700055211857  
CITY - ST - ZIP 05/25/05--01003--017 \*\*1200.00

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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 or 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/29/05 361445425