

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # M96000000077

1. Entity Name
LIGHTSHIP TANKERS I LLC



Principal Place of Business
2200 ELLER DRIVE, BUILDING 27
PORT EVERGLADES STATION
FT. LAUDERDALE, FL 33316

Mailing Address
2200 ELLER DR. - LEGAL DEPT.
P.O. BOX 13038
FT. LAUDERDALE, FL 33316



01112005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0643554

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FINCH, STEPHEN B JR.
C/O SEABULK INTERNATIONAL, INC.
2200 ELLER DRIVE, BUILDING 27
FORT LAUDERDALE, FL 33316

**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
KURT, GERHARD E
2200 ELLER DRIVE, BLDG. 27
PT. EVERGLADES STA., FT. LAUD., FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
TWAITS, ALAN R
2200 ELLER DRIVE, BUILDING 27
FT. LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
FINCH, STEPHEN B JR
2200 ELLER DRIVE, BUILDING 27
FT. LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
WILLRICH, L. STEPHEN
2200 ELLER DRIVE, BUILDING 27
FORT LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
DESOSTOA, VINCENT J
2200 ELLER DRIVE, BUILDING 27
FORT LAUDERDALE, FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000332126
04/26/05-80045-019 50.00

**DO NOT WRITE
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)(f), 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:

SB Finch

Stephen B. Finch

4/18/05

954-523-2200

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

Date

Daytime Phone #