2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000013029

1. Entity Name
SEABULK OFFSHORE INTERNATIONAL, INC.

Principal Place of Business	*Mailing Address*
2200 ELLER DRIVE BLDG. 27, LEGAL DEPT. FORT LAUDERDALE, FL 33316	2200 ELLER DRIVE BLDG. 27, LEGAL DEPT. FORT LAUDERDALE, FL 33316

01112005 No Chg-P CR2E034 (10/03)

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4. FEI Number
65-0608734
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TWAITS, ALAN R
2200 ELLER DRIVE
BLDG. 27
FORT LAUDERDALE, FL 33316

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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, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CPD
NAME	KURZ, GERHARD E
STREET ADDRESS	2200 ELLER DRIVE, BLDG. 27
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316
TITLE	SVPT
NAME	DESOSTA, VINCENT J
STREET ADDRESS	2200 ELLER DRIVE, BLDG. 27
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316
TITLE	SVPD
NAME	TWAITS, ALAN R
STREET ADDRESS	2200 ELLER DRIVE, BLDG. 27
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316
TITLE	SVP
NAME	FRANCOIS, LARRY D
STREET ADDRESS	2200 ELLER DR
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316
TITLE	VSD
NAME	FINCH, STEPHEN B
STREET ADDRESS	2200 ELLER DR BLDG. 27
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/25/05-80169-010 150.00

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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: SB Finch Stephen B. Finch 4/18/05 (954) 523-2200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #