#### **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22000007222

Entity Name: VESSEL MANAGEMENT SERVICES (DELAWARE), INC.

**FILED** Apr 25, 2023 Secretary of State 8086623754CC

### **Current Principal Place of Business:**

9487 REGENCY SQUARE BOULEVARD

JACKSONVILLE, FL 32225

### **Current Mailing Address:**

9487 REGENCY SQUARE BOULEVARD JACKSONVILLE, FL 32225 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 801 US HIGHWAY 1 NORTH PALM BCH, FL 33408 US

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.

SIGNATURE:

City-State-Zip:

Address

Date Electronic Signature of Registered Agent

Officer/Director Detail :

Title **SVP & DIRECTOR** Title CORPORATE SECRETARY

YACAVONE, MATTHEW J. Name Name ALFORD, REECE B.

9487 REGENCY SQUARE 9487 REGENCY SQUARE Address Address

**BOULEVARD BOULEVARD** 

JACKSONVILLE FL 32225 City-State-Zip: JACKSONVILLE FL 32225

Title ASSISTANT CORPORATE Title **CFO** 

> SECRETARY Name

WARNER, DANIEL L. Name MEAD, ARTHUR F. III

9487 REGENCY SQUARE Address 9487 REGENCY SQUARE Address **BOULEVARD** 

**BOULEVARD** 

City-State-Zip: JACKSONVILLE FL 32225 City-State-Zip: JACKSONVILLE FL 32225

Title ASSISTANT TREASURER Title **VP & TREASURER** 

Name OTERO, TONY R. Name HIMES, NORMAN S. JR.

9487 REGENCY SQUARE Address Address

9487 REGENCY SQUARE **BOULEVARD** 

**BOULEVARD** City-State-Zip: JACKSONVILLE FL 32225

City-State-Zip: JACKSONVILLE FL 32225

Title ASSISTANT TREASURER Title ASSISTANT TREASURER LAMB, RICHARD D. JR. Name Name

SMITH, BRYAN C. Address 9487 REGENCY SQUARE

9487 REGENCY SQUARE **BOULEVARD** 

**BOULEVARD** City-State-Zip: JACKSONVILLE FL 32225

JACKSONVILLE FL 32225 City-State-Zip:

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**FACT** 

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

04/25/2023 SIGNATURE: REECE B. ALFORD SECRETARY, BY JULIE PHILLIPS, ATTORNEY-IN-

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VP

Name GILLIAM , TUCKER

Address 9487 REGENCY SQUARE BOULEVARD

City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR

Name FITZGERALD , RAYMOND F.

Address 9487 REGENCY SQUARE BOULEVARD

City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR (CHAIR)

Name CROWLEY , THOMAS B. JR.

Address 9487 REGENCY SQUARE

BOULEVARD

City-State-Zip: JACKSONVILLE FL 32225