FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90101 039 ***150.00

1 100)211 0100	311 0 1 11 0 14 00 1 0 1 11 0 1	1 111 131 131 111 131 131 131 131 131 1	ii Bibii Bibii Bibii ibb

DO NOT WRITE IN THIS SPACE

DOCUMENT	#	H3101	a
Corporation Name	•	110101	J

CELT, INC.

Principal Place of Business

Mailing Address

1 NORTH TAMIAMI TRAIL SARASOTA FL 34236-5537 1 NORTH TAMIAMI TRAIL SARASOTA FL 34236-5537

2. Principal Place of Business
Suite, Apt. #, etc. Suite, Ap
Suite, Apt. #, etc. 27 City & State 20 Country 20 Country 20 S. This corporation owes the current year intangible 20 Personal Property Tax. 20 Pe
S. Certificate of Status Desired Fee Required City & State City & Sta
City & State City & State City & State City & State S
Zip Country Zip Country St. This corporation owes the current year inlangible Personal Property Tax Yes No.
Zip Country Zip Country 8. This corporation owes the current year intangible Personal Property Tax. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of Now Registered Agent 18. Name 18. Name
9. Name and Address of Current Registered Agent HASKINS, HARRY W 1800 2ND ST STE 819 SARASOTA FL 34236 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and transfer with an ad accept the drigostones, of, Section 607,0502, Florida Statutes. SIGNATURE SIGNATURE PARRY LAURENCE H. PARRY LAURENCE H. SIREET ADORESS SARASOTA FL 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PARRY LAURENCE H. 12. NAME PARRY LAURENCE H. 12. NAME PARRY LAURENCE H. 13. STREET ADORESS SARASOTA FL 14. CITY-ST-ZP Addition Change Addition CITY-ST-ZP Addition PARRY, VALERIE M. SIREET ADORESS SIREET ADORESS SIREET ADORESS STREET ADORESS ST
HASKINS, HARRY W 1800 2ND ST STE 819 SARASOTA FL 34236 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above and agent 1 am familiar with, and accept the projection office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the purpose of changing its registered agent, amount of the provisions of Sections 607.0505, Florida Statutes, the above and the flaphicable. SIGNATURE Signature, byerd or protect different or ingignized agent and take it applicable. (NOTE: Registered Agent agenture required when refinatoring) A RANCED MUHLD ACK. (NOTE: Registered Agent agenture required when refinatoring) OATE OATE OATE OATE OATE ACH Change Addition ASTREET ADDRESS CITY-ST-ZIP SARASOTA FL OBLETE 21 TITLE AS OBLETE AS OBLETE AS OBLETE AS OBLETE AS OBLETE AD OBLETE 21 TITLE AS OBLETE AS
HASKINS, HARRY W 1800 2ND ST STE 819 SARASOTA FL 34236 82 Street Address (P.O. Box Number is Not Acceptable) NORTH TAMI, AMI, TRAIL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in am fauriflar with, and accept the obligations of, Section 607,050S, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PT DELETE 13. TITLE PARRY LAURENCE H. 13. STREET ADDRESS SARASOTA FL 14. CITY-ST-ZIP Change Addition Change Chan
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the diffusion of registered agent agent and accept the diffusion of registered agent
STE 819 SARASOTA FL 34236 84 City SARASOTA FL 85 Zip Code 3 42 36 84 City SARASOTA FL 85 Zip Code 3 42 36 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the objigations of Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE Signature, hyperd or printed dwine of registered agent and time if applicable. (NOTE: Registered dwiner required when refittation) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PT DELETE 11 TITLE PARY LAURENCE H. 12 NAME PARRY LAURENCE H. 13 AMSOTA FL 14 CITY-ST-ZIP Change Addition PARRY, VALERIE M. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 23 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 23 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 23 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 23 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 33 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 34 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 35 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 5400 OCE
SARASOTA FL 34236 84 City SARASOTA TL Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the displacions of, Section 607,0505, Florida Statutes. SIGNATURE Signature. Vyland or printed rifeme of registered agent and title if applicable. (NOTE: Registered Agent signature required when refinitation) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PARRY LAURENCE H. 12. NAME SIREET ADDRESS CITY-ST-ZIP TITLE AS DELETE 21 TITLE AS DELETE 21 TITLE D Change Addition NAME PARRY, VALERIE M. STREET ADDRESS SARASOTA FL DELETE 31 TITLE SARASOTA FL Change Addition Change Addition Change Addition Change Addition AME SIREET ADDRESS SARASOTA FL DELETE 31 TITLE NAME SIREET ADDRESS SARASOTA FL Change Addition Change Addition Change Addition AME SIREET ADDRESS SARASOTA FL Change Addition AME SARASOTA FL Change ADDITIONS/CHANGES TO O
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in an fardillifer with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PT NAME PARRY LAURENCE H. STREET ADDRESS SARASOTA FL 14. CTTY-ST-ZIP TITLE AS DELETE 14. CTTY-ST-ZIP TITLE AS TREET ADDRESS SARASOTA FL OELETE 21. TITLE AS STREET ADDRESS SARASOTA FL OELETE 32. STREET ADDRESS SARASOTA FL OELETE 33. STREET ADDRESS CITY-ST-ZIP TITLE AS CITY-ST-ZIP DELETE 24. CITY-ST-ZIP Addition Change Addition Addition AME STREET ADDRESS STREET ADDRESS STREET ADDRESS SARASOTA FL OELETE 33. STREET ADDRESS SARASOTA FL 14. CTTY-ST-ZIP DELETE 24. CITY-ST-ZIP Addition AME STREET ADDRESS SARASOTA FL OELETE 33. STREET ADDRESS SARASOTA FL Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objections of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed dame of registered agent and tile if applicable. (NOTE: Registered Agent signature required when refinateing) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PARRY LAURENCE H. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 TITLE AS PARRY, VALERIE M. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT.2-1 23 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT.2-1 23 STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT.2-1 24 CITY-ST-ZIP TITLE AS SARASOTA FL DELETE 3.1 TITLE DATE Change Addition Addition AME STREET ADDRESS SARASOTA FL 32 STREET ADDRESS STREET
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the displacations of Section 607,0505, Florida Statutes. SIGNATURE Signature. Update of printed risms of registered agent and title if applicable. In the Signature, typed of printed risms of registered agent and title if applicable. NAME PARRY LAURENCE H. STREET ADDRESS SARASOTA FL TITLE PARRY, VALERIE M. STREET ADDRESS SARASOTA FL TITLE DELETE 1.1 TITLE DASS SARASOTA FL 1.2 NAME PARRY, VALERIE M. STREET ADDRESS SARASOTA FL DELETE 3.1 TITLE 2.1 STREET ADDRESS SARASOTA FL DELETE 3.1 TITLE AS SARASOTA FL SARASOTA FL
SIGNATURE Signature, typed or printed risme of registered agent and tile if applicable. (NOTE: Registered Agent signature required when refusations) 12.
Signature, typed of printed rame of registered agent and title if applicable. (NOTE: Registered Agent signature required when refliatating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PT DELETE 1.1 TITLE D Change Addition PARRY LAURENCE H. STREET ADDRESS CITY-ST-ZIP SARASOTA FL TITLE AS DELETE 2.1 TITLE D Change Addition
12. OFFICERS AND DIRECTORS TITLE PT DELETE 1.1 TITLE NAME PARRY LAURENCE H. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 TITLE AS NAME PARRY, VALERIE M. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 TITLE AS NAME PARRY, VALERIE M. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 CITY-ST-ZIP TITLE SARASOTA FL 22 NAME 22 NAME 33 STREET ADDRESS CITY-ST-ZIP TITLE D Change Addition
TITLE PT DELETE 1.1 TITLE D Change Addition NAME PARRY LAURENCE H. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 TITLE AS AS DELETE 2.1 TITLE D Change Addition NAME PARRY, VALERIE M. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT. 2-1 TITLE AS DELETE D Change Addition PARRY, VALERIE M. STREET ADDRESS 5400 OCEAN BLVD. THE TERRACE APT.2-1 SARASOTA FL 2.3 STREET ADDRESS CITY- ST- ZIP 3.1 TITLE NAME SARASOTA FL 2.4 CITY- ST- ZIP TITLE D Change Addition Change Addition Addition STREET ADDRESS 3.2 NAME STREET ADDRESS CITY- ST- ZIP STREET ADDRESS CITY- ST- ZIP TITLE 3.2 NAME STREET ADDRESS CITY- ST- ZIP STREET ADDRESS CITY- ST- ZIP TO Addition Addition
STREET ADDRESS CITY-ST-ZIP SARASOTA FL 1.3 STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP TITLE AS NAME PARRY, VALERIE M. STREET ADDRESS CITY-ST-ZIP SARASOTA FL 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE SARASOTA FL 2.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS SARASOTA FL 3.2 NAME STREET ADDRESS CITY-ST-ZIP SARASOTA FL 3.3 STREET ADDRESS CITY-ST-ZIP
CITY-ST-ZIP SARASOTA FL 1.4 CITY-ST-ZIP TITLE AS PARRY, VALERIE M. STREET ADDRESS CITY-ST-ZIP SARASOTA FL DELETE 2.1 TITLE PARRY, VALERIE M. 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE NAME STREET ADDRESS SARASOTA FL 3.2 NAME STREET ADDRESS CITY-ST-ZIP 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP
TITLE AS DELETÉ 2.1 TITLE DARRY, VALERIE M. STREET ADDRESS SARASOTA FL 1TITLE DELETÉ 2.1 TITLE DARRESS SARASOTA FL 1TITLE DELETE 3.1 TITLE NAME STREET ADDRESS 3.2 NAME STREET ADDRESS CITY- ST- ZIP 1.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY- ST- ZIP 1.3 NAME STREET ADDRESS CITY- ST- ZIP
TITLE AS DELETÉ 2.1 TITLE DARRY, VALERIE M. STREET ADDRESS SARASOTA FL TITLE SARASOTA FL DELETE 3.1 TITLE NAME STREET ADDRESS SARASOTA FL STREET ADDRESS SARASOTA FL STREET ADDRESS SARASOTA FL SARASOTA F
STREET ADDRESS CITY-ST-ZIP SARASOTA FL 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 3.2 NAME STREET ADDRESS CITY-ST-ZIP 3.3 STREET ADDRESS CITY-ST-ZIP
CITY-ST-ZIP SARASOTA FL 2.4 CITY-ST-ZIP TITLE
TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP
NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP
STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP
CITY-ST-ZIP 3.4. CITY-ST-ZIP
Charge Addition
TITLE L.J DELETE 4.1 TITLE £1 Change L.J Addition
NAME 4.2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY- ST-ZIP 4.4 CITY- ST-ZIP TITIE DELETE 5.1 TITLE Change Addition
SAMAR .
NAME
STREET ADDRESS
CITY-S1-ZIP 54 CITY-S1-ZIP TITLE DELETE 6.1 TITLE Change Addition
3
alabre I ■ 6.2 NAME I
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. 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 annual report or suppliemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/4/98 941-365-190

R2F034 (11/9)