

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 09, 2006 8:00 am**  
**Secretary of State**

05-09-2006 90069 048 \*\*\*150.00

**DOCUMENT # H91019**

1. Entity Name

CELT, INC.



Principal Place of Business

3701 BEE RIDGE RD  
SARASOTA FL 34233  
US

Mailing Address

3701 BEE RIDGE RD  
SARASOTA FL 34233  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

59-2467720

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MUHLBACH, ARNOLD  
3701 BEE RIDGE RD  
SARASOTA FL 34233

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PTD ☐ Delete  
NAME PARRY LAURENCE H.  
STREET ADDRESS 3701 BEE RIDGE RD  
CITY-ST-ZIP SARASOTA FL 34233

TITLE SD ☐ Delete  
NAME PARRY, VALERIE M.  
STREET ADDRESS 3701 BEE RIDGE RD  
CITY-ST-ZIP SARASOTA FL 34233

TITLE V ☐ Delete  
NAME LEEREVELD, BART  
STREET ADDRESS 3701 BEE RIDGE RD  
CITY-ST-ZIP SARASOTA FL 34233

TITLE D ☐ Delete  
NAME LEEREVELD, KARIN  
STREET ADDRESS 3701 BEE RIDGE ROAD  
CITY-ST-ZIP SARASOTA FL 34233

TITLE D ☐ Delete  
NAME CLVETT, SIAN  
STREET ADDRESS 3701 BEE RIDGE ROAD  
CITY-ST-ZIP SARASOTA FL 34233

TITLE D ☐ Delete  
NAME PARRY, JULIAN H.  
STREET ADDRESS 3701 BEE RIDGE ROAD  
CITY-ST-ZIP SARASOTA FL 34233

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

TITLE ☒ Change ☐ Addition  
NAME SIAN CLUETT  
STREET ADDRESS  
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:**

L.H. PARRY

*[Signature]*

4/18/06

941-924-2229

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #