

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036634

Entity Name: CELTAE, LLC

FILED  
Apr 24, 2006  
Secretary of State

**Current Principal Place of Business:**

82 6TH STREET  
APALACHICOLA, FL 32320

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 250  
APALACHICOLA, FL 32329

**New Mailing Address:**

FEI Number: 80-0110563

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BANKS, KRISTY  
82 6TH STREET  
APALACHICOLA, FL 32320 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ANCHOR REALTY & MORT, GAGE CO.  
Address: 119 FRANKLIN BLVD  
City-St-Zip: ST. GEORGE ISLAND, FL 32328

Title: MGRM ( ) Delete  
Name: DUCIMETIER-MONOD, OLIVIER  
Address: 79 AVENUE G  
City-St-Zip: APALACHICOLA, FL 32320

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ANCHOR REALTY & MORT, GAGE COMPANY O F ST. GE  
Address: 119 FRANKLIN BLVD  
City-St-Zip: ST. GEORGE ISLAND, FL 32328

Title: MGRM (X) Change ( ) Addition  
Name: DUCIMETIERE-MONOD, OLIVIER  
Address: 79 AVENUE G  
City-St-Zip: APALACHICOLA, FL 32320

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: OLIVIER DUCIMETIERE-MONOD

MGRM

04/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date