


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 03, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L06000062956</b> 1. Entity Name CELTIC RESOURCES, LLC	
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Principal Place of Business 3850 VICKERS LAKE JACKSONVILLE, FL 32224	Mailing Address 3850 VICKERS LAKE JACKSONVILLE, FL 32224
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**DO NOT WRITE IN THIS SPACE**



02122008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 51-0594795	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LAYMAN, CARL  
3850 VICKERS LAKE DR  
JACKSONVILLE, FL 32224

**DO NOT WRITE  
IN THIS SPACE**

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: Carl Layman CARL LAYMAN 2/28/2008  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LAYMAN, CARL M III 3850 VICKERS LAKE DR JACKSONVILLE, FL 32224
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MANUS, RONALD 130 MERZ BLVD. FAIRLAWN, OH 44333
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000847055  
03/19/08-80004-004 138.75

**DO NOT WRITE  
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Carl Layman CARL LAYMAN 2/28/2008  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #