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**

DOCUMENT # P98000052354

1. Corporation Name

CELTIC ENTERPRISES, INC.

Principal Place of Business	Mailing Address
317 WHITEHEAD STREET KEY WEST FL 33041	317 WHITEHEAD STREET KEY WEST FL 33041

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

04-22-1999 90058 013 ***150.00



JEST FL 33041	KEY WEST FL 33041			DO NOT WRITE IN THIS SPACE					
				3. Date Incorporated or Qualifed 06/09/1998					
incipal Place of Business	2a. Mailing Address			4. FEI Number Applied For					
1 211-C Duval Street 26 211-C Duval Stre			. 4	65-0875878 Not Applicab					
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired \$8.75 Additional Fee Required					
ty&State Key West, Florida	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees					
Country 25 USA	Zip Country			.8. This corporation owes the current year Intangible Personal Property Tax.					
24 33040 25 USA 29 33040 30 USA 29 33040 30 USA 29 34040 30 USA 29 34040 30 USA 29 34040 30 USA 34040				10. Name and Address of New Registered Agent					
HENDRICK JAMES T		81	Name						
317 WHITEHEAD STREET		82 Street Address (P.O. Box Number is Not Acceptable)							
KEY WEST FL 33041		83							
		84	City	FL 85 Zip Code					
	incipal Place of Business 11—C Duval Street ille, Apt. #, etc. by & State Key West, Florida Country 3040 9. Name and Address of Current HENDRICK, JAMES T	EST FL 33041 KEY WEST FL 33041 Incipal Place of Business 11—C Duval Street Ite, Apt. #, etc. 28 211—C Duval Street Suite, Apt. #, etc. 27 by & State Key West, Florida Country Country 3040 28 Key West, Flori Country 29 33040 9. Name and Address of Current Registered Agent HENDRICK, JAMES T 317 WHITEHEAD STREET	EST FL 33041 KEY WEST FL 33041 Za. Mailing Address 26 211-C Duval Street Suite, Apt. #, etc. 27 City & State Key West, Florida Country Zip Country 3040 28 Key West, Florida Country Zip Country 3040 9. Name and Address of Current Registered Agent HENDRICK, JAMES T 317 WHITEHEAD STREET KEY WEST FL 33041 82	EST FL 33041 KEY WEST FL 33041 Za. Mailing Address 2a. Mailing Address 2b. 2ll – C. Duval Street Suite, Apt. #, etc. 27 City & State Key West, Florida Zip Country Zip Country 3040 25 USA 9. Name and Address of Current Registered Agent HENDRICK, JAMES T 317 WHITEHEAD STREET KEY WEST FL 33041 KEY WEST FL 33041					

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 obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Re	egistered Agent signature r	equired when reinsta	ating)		DATE					
12,	OFFICERS AND DIRECTORS		13.	ADD	TIONS/C	HANGES T	O OFFICERS A	ND DIRECTO				
TITLE	D	☐ DELETE	1.1 TITLE	Preside	ent			Change	X Addition			
NAME	HENDRICK, JAMES T		1.2 NAME	Kevin E	Englis	h						
STREET ADDRESS	317 WHITEHEAD STREET		1.3 STREET ADDRESS	211-C D	_							
CITY-ST-ZIP	KEY WEST FL 33041		1.4 CITY-ST-ZIP	Key Wes	st, Fl	orida	33040					
TITLE		DELETE	2.1 TITLE					☐ Change	☐ Addition			
NAME			2.2 NAME				•					
STREET ADDRESS		_	2.3 STREET ADDRESS		_		٠, ١		•			
CITY-ST-ZIP			2. 4 C/TY-ST-ZIP									
TITLE		DELETE	3.1 T/TLE					Change	Addition			
NAME			3.2 NAME									
STREET ADDRESS			3.3 STREET ADDRESS									
CITY-ST-ZIP	·		3.4. CITY-ST-ZIP									
TITLE		DELETE	4.1 TTLE					☐ Change	☐ Addition			
NAME .			4.2 NAME									
STREET ADDRESS		•	4.3 STREET ADDRESS					*				
CITY-ST-ZIP			4.4 CITY-ST-ZiP									
TITLE		DELETE	5.1 TITLE					☐ Change	Addition			
NAME			5.2 NAME									
STREET ADDRESS	• • •		5.3 STREET ADDRESS									
Crty-ST-ZIP	·		5.4 CITY-ST-ZIP		_							
TITLE		☐ DELETE	6.1 TITLE					☐ Change	☐ Addition			
NAME			6.2 NAME									
STREET ADDRESS			6.3 STREET ADDRESS									
CITY-ST-ZIP			6.4 CITY-ST-ZIP				··					

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 supplemental 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 trustee 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:

MERECKEVINE ENGLISH/President