

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # A01000001085

1. Entity Name
GEIGER VENTURES, LLLP



Principal Place of Business
**19070 STRANGERONE RD
BELLE FOURCHE, SD 37717**

Mailing Address
**19070 STRANGERONE RD
BELLE FOURCHE, SD 37717**



DO NOT WRITE IN THIS SPACE

01132006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
59-3738011

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**CAUTHEN, WILLIAM H ESQ.
215 NORTH JOANNE AVENUE
TAVARES, FL 32778**

**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 _____
Signature, typed or printed name of registered agent and title if applicable

DATE _____

**FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME **GEIGER, ELWOOD E TRUSTEE**
STREET ADDRESS **19070 STRANGERONE RD**
CITY-ST- ZIP **BELLE FOURCHE, SD 57717**

DOCUMENT #
NAME **GEIGER, MARILYN T TRUSTEE**
STREET ADDRESS **19070 STRANGERONE RD**
CITY-ST- ZIP **BELLE FOURCHE, SD 55717**

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CITY-ST- ZIP

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U00000418037
02/13/06-80080-012 500.00

**DO NOT WRITE
IN THIS SPACE**

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Marilyn T. Geiger Marilyn T. Geiger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/23/06 605-892-2493
Date Daytime Phone #

STAPLE CHECK HERE