## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 06, 2006 8:00 am Secretary of State

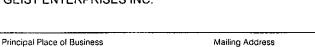
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1. Entity Name

GEIST ENTERPRISES INC.

4445 BONITA BEACH RD BONITA SPRINGS, FL 34134



Mailing Address
4445 BONITA BEACH RD

BONITA SPRINGS, FL 34134

4000



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01202006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0054290 Applied For
Not Applicable

5. Certificate of Status Desired Fee Required
Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

GEIST, PAT 703 S.E. 32ND TERRACE CAPE CORAL, FL 33923

SIGNATURE:

## 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 site if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P GEIST, PAT 5428 SW 2ND PL. CAPE CORAL, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEIST, PAULA 5428 SW 2ND PL. CAPE CORAL, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HILL, JIM 10122 TROPICAL DR BONITA SPRINGS, FL	·	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					
NAME STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 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.					