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# ANNUAL REPORT DOMESTIC LLP

SDCL 48-7A-1003; 59-11-24.1

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FILE DATE \_\_\_\_\_  
RECEIPT NO \_\_\_\_\_

Telephone # \_\_\_\_\_

1. LLP ID and Name:

Enter LLP ID

Enter LLP Name

2. The jurisdiction under whose law it is formed South Dakota

3. The address of the principal or chief executive office.

Actual Street Address or Rural Route Box Number City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

Email Address (Optional)

IF ADDRESS IN #3 IS NOT A SOUTH DAKOTA ADDRESS QUESTION #4 IS REQUIRED.

4. The name of the South Dakota Registered Agent \_\_\_\_\_

Actual Street Address or Rural Route Box Number in this State City State ZIP+4

Mailing Address in this State, if Different from Street Address City State ZIP+4

Email Address (Optional)

5. Beneficial Interest (optional)

Owner Description of Ownership Percentage/Value

Owner Description of Ownership Percentage/Value

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty (SDCL 47-1A-129).

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an Authorized Person)

Email \_\_\_\_\_

(Optional)

\_\_\_\_\_  
(Printed Name)