No. <b>W 37530</b>		Due no later than Mar 31, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			TROY BRAMFIELD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.  COMMUNITY CARE LEASING, L.L.C.  TROY R BRUMFIELD  2725 CHANNING WAY  IDAHO FALLS ID 83404			2725 CHANNING WAY			
				IDAHO FALLS ID 83404  3. New Registered Agent Signature:*				
4. Limited Liability Compa	nies: Enter Nar	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	TROY R BRUMFIELD		356 LA COSTA DR	IDAHO FALLS	ID	USA	83401	
MEMBER	DEREK CAMPBELL		638 DELL DRIVE	REXBURG	ID	USA	83440	
MEMBER	CLAY PRINCE		655 HARVEST DRIVE	REXBURG	ID	USA	83440	
MEMBER	JEFFREY ZOLLINGER		950 GREENHAVEN	REXBURG	ID	USA	83440	
MEMBER	BRYAN HAMMAR		3833 E 38 NORTH	RIGBY	ID	USA	83442	
MEMBER	DAVID DANIELS		205 MARIANNE DRIVE	REXBURG	ID	USA	83440	
MEMBER	JEFFREY STIEGLITZ		646 HWY. 91	FIRTH	ID	USA	83236	
MEMBER	SCOTT PACKER		7584 S. 8TH W.	<b>IDAHO FALLS</b>	ID	USA	83402	
MEMBER JOSEPH ANDERSON		4584 S. 45 E.	<b>IDAHO FALLS</b>	ID	USA	83406		
MEMBER	JAMES F MA	AGUIRE	3015 S. 2810 W.	REXBURG	ID	USA	83440	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 37530		Signature: Tro	by R Brumfield		Date: 02/10/2014			
		Name (type or print): Troy R Brumfield			Title: Member			
Processed 02/10/2014		* Electronically pr	ovided signatures are accepted as original	signatures.				