

No. C 160240		Due no later than Apr 30, 2018		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. SCOTT LEAVITT INSURANCE & FINANCIAL SERVICES, INC. SCOTT A LEAVITT 12988 W PAINT DR BOISE ID 83713		SCOTT A LEAVITT 12988 W PAINT DR BOISE ID 83713		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
TREASURER	AMY D LEAVITT	12988 W PAINT DR	BOISE	ID	USA	83713
SECRETARY	AMY D LEAVITT	12988 W PAINT DR	BOISE	ID	USA	83713
PRESIDENT	SCOTT A LEAVITT	12988 W PAINT DR	BOISE	ID	USA	83713
5. Organized Under the Laws of: ID C 160240		6. Annual Report must be signed.* Signature: Scott A Leavitt Name (type or print): Scott A Leavitt Date: 03/11/2018 Title: President				
Processed 03/11/2018		* Electronically provided signatures are accepted as original signatures.				