No. C 204186 Return to:		Due no later than Nov 30, 2016 Annual Report Form		2. Registered Age	Registered Agent and Address (NO PO BOX) CORPORATION SERVICE COMPANY			
				CORPORATION				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. LEAVITT UNITED INSURANCE SERVICES, INC. TWILA BRINKERHOFF PO BOX 130		BOISE ID 837	12550 W EXPLORER DR STE 100 BOISE ID 83713			
NO FILING FEE IF RECEIVED BY DUE DATE		CEDAR CITY UT 84721-0130		3. <u>New</u> Registered Agent Signature:*				
4. Corporations: Enter	Names and Busin	ess Addresses of Pr	esident, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	VANCE K SI	MITH	216 S 200 W	CEDAR CITY	UT		84720	
DIRECTOR	MICHAEL K	MCCREARY	3245 W FIGARDEN DR	FRESNO	CA	USA	93711	
PRESIDENT	MICHAEL K	MCCREARY	3245 W FIGARDEN DRIVE	FRESNO	CA	USA	93729	
VICE PRESIDENT BRIAN MULHOLLAND		HOLLAND	2358 MARITIME DR STE 100	ELK GROVE	CA	USA	95758	
VICE PRESIDENT DIANA GRANILLO		VILLO	3245 W FIGARDEN DRIVE	FRESNO	CA	USA	93729	
SECRETARY	ECRETARY MARK G KENNEY		216 S 200 W	CEDAR CITY	UT	USA	84720	
TREASURER	DEREK SNOW		465 S 400 E SUITE 300	SALT LAKE CITY	UT	USA	84111	
DIRECTOR	ERIC O LEAVITT		216 S 200 W	CEDAR CITY	UT	USA	84720	
DIRECTOR	CAYLOR J DALLEY		216 S 200 W	CEDAR CITY	UT	USA	84720	
DIRECTOR	BRIAN MULH	HOLLAND	2358 MARITIME DR STE 100	ELK GROVE	CA	USA	95758	
5. Organized Under the Laws of: 6. A		5. Annual Report must be signed.*						
CA C 204186		Signature: TWILA BRINKERHOFF		Date: 10/07/20	Date: 10/07/2016			
		Name (type or print): TWILA BRINKERHOFF		Title: ADMINIS	Title: ADMINISTRATIVE ASSISTANT			
Processed 10/07/2016		* Electronically prov	vided signatures are accepted as original	signatures.				