

No. <b>C 198914</b>		<b>Due no later than Jun 30, 2017</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b> LEAVITT INSURANCE GROUP OF ATLANTA, INC. (THE) KATIE BEARNSON 216 S 200 W CEDAR CITY UT 84720 USA		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 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
DIRECTOR	VANCE K SMITH	216 S 200 W	CEDAR CITY	UT	USA	84720
DIRECTOR	JAKE JENSEN	216 S 200 W	CEDAR CITY	UT	USA	84720
DIRECTOR	DAVID L BRIDGES	2200 CENTURY PARKWAY SUITE 410	ATLANTA	GA	USA	30345
PRESIDENT	DAVID L BRIDGES	2200 CENTURY PARKWAY SUITE 410	ATLANTA	GA	USA	30345
VICE PRESIDENT	STEVEN BALLTRIP	192 WOODRIDGE DRIVE	SPARTANBURG	NC	USA	92301
SECRETARY	MARK G KENNEY	216 S 200 W	CEDAR CITY	UT	USA	84720
TREASURER	JAKE JENSEN	216 S 200 W	CEDAR CITY	UT	USA	84720
5. Organized Under the Laws of:  <b>GA C 198914</b>		6. Annual Report must be signed.* Signature: Katie Bearnson Name (type or print): Katie Bearnson Date: 05/01/2017 Title: Compliance Specialist				
Processed 05/01/2017		* Electronically provided signatures are accepted as original signatures.				