

No. C 202196		Due no later than May 31, 2015 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. LEAVITT INSURANCE AGENCY OF CENTRAL UTAH, INC. TWILA BRINKERHOFF 216 S 200 W CEDAR CITY UT 84720		THE LEAVITT GROUP OF BOISE INC 6220 N DISCOVERY WAY 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	
PRESIDENT	DAVID BROADBENT	216 S 200 W	CEDAR CITY	UT	USA	84720	
VICE PRESIDENT	MIKE BRODERICK	96 S MAIN, STE 6	EPHRAIM	UT	USA	84627	
VICE PRESIDENT	MICHAEL VOWLES	199 N MAIN	SPANISH FORK	UT	USA	84660	
SECRETARY	MARK G KENNEY	216 S 200 W	CEDAR CITY	UT	USA	84720	
TREASURER	SCOTT BARNEY	216 S 200 W	CEDAR CITY	UT	USA	84720	
DIRECTOR	DAVID BROADBENT	216 S 200 W	CEDAR CITY	UT	USA	84720	
DIRECTOR	MIKE BRODERICK	96 S MAIN, STE 6	EPHRAIM	UT	USA	84627	
DIRECTOR	MICHAEL VOWLES	199 N MAIN	SPANISH FORK	UT	USA	84660	
DIRECTOR	ERIC O LEAVITT	216 S 200 W	CEDAR CITY	UT	USA	84720	
DIRECTOR	VANCE K SMITH	216 S 200 W	CEDAR CITY	UT	USA	84720	
5. Organized Under the Laws of: UT C 202196		6. Annual Report must be signed.* Signature: TWILA BRINKERHOFF Name (type or print): TWILA BRINKERHOFF Date: 06/19/2015 Title: ADMINISTRATIVE ASSISTANT					
Processed 06/19/2015		* Electronically provided signatures are accepted as original signatures.					