

No. C 204996		Due no later than Feb 29, 2016 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 & CENTRAL BOND SERVICES, INC. MICHAEL R VOWLES PO BOX 757 SPANISH FORK UT 84660		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	
PRESIDENT	CAYLOR DALLEY	216 S 200 W	CEDAR CITY	UT	84720		
SECRETARY	MARK KENNEY	216 S 200 W	CEDAR CITY	UT	84720		
5. Organized Under the Laws of: UT C 204996		6. Annual Report must be signed.* Signature: Michael R Vowles Name (type or print): Michael R Vowles Date: 12/23/2015 Title: Vice President					
Processed 12/23/2015 * Electronically provided signatures are accepted as original signatures.							