

|  |                |  |          |  |         |             |  |
|--|----------------|--|----------|--|---------|-------------|--|
| No. <b>W 56654</b>   |                | <b>Due no later than Nov 30, 2011</b>  |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>     |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>LEAVITT PROPERTIES, LLC<br>EDWARD LEAVITT<br>4323 PIONEER RD<br>HOMEDALE ID 83628<br>USA |          | EDWARD LEAVITT<br>4323 PIONEER RD<br>HOMEDALE ID 83628 |         |             |  |
|  |                |  |          | 3. <u>New</u> Registered Agent Signature: *            |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.   |                |  |          |  |         |             |  |
| Office Held  | Name           | Street or PO Address   | City     | State  | Country | Postal Code |  |
| MEMBER   | EDWARD LEAVITT | 4323 PIONEER RD  | HOMEDALE | ID   | USA     | 83628       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 56654</b>   |                | 6. Annual Report must be signed.*<br>Signature: Vicki Case<br>Name (type or print): Vicki Case<br>Date: 09/23/2011<br>Title: Office Manager  |          |  |         |             |  |
| Processed 09/23/2011   |                | * Electronically provided signatures are accepted as original signatures.  |          |  |         |             |  |