

No. C112042	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct BERGQUIST-LEAVITT INSURANCE 1720 N. 24th St. Suite C 1500 N WHITLEY #3		RANDY L BERGQUIST 1500 N WHITLEY #3 1720 N. 24th St. Suite C FRUITLAND ID 83619
	3. Organized Under the Laws of:		ID C112042
* FIRST NOTICE * FRUITLAND ID 83619			

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	ERIC O LEAVITT	1831 HERBERT AVE	SLC	UT	84108
1st V.P.	RANDY L BERGQUIST	104 HELL RD	WEISER	ID	83672
2nd V.P.	JAY L JENSEN	1202 E MAIN	EMMETT	ID	83617
SECRETARY	DANE O LEAVITT	242 SO 200W	CEAR CITY	UT	84720
TREASURER	CAYLOR J DALLEY	2598 W 100 SO	HURRICANE	UT	84737

5. NATURE OF BUSINESS INSURANCE AGENCY	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.	
	Signature <u>Caylor J Dalley</u> Name (Typed or Printed) <u>CAYLOR J DALLEY</u>	Date <u>9/26/96</u> Title <u>TREASURER</u>

ISSUED: 07-06-1996

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