

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000002620

Entity Name: CIA-LEAVITT INSURANCE AGENCY, INC.

Current Principal Place of Business:

100 PREMIUM WAY
ALAMOSA, UT 81101

Current Mailing Address:

PO BOX 130
CEDAR CITY, UT 84721-0135 US

FEI Number: 84-1532539

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name GRADY, KEVIN P.
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135

Title DIRECTOR
Name SMITH, VANCE K.
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135

Title CEO, DIRECTOR
Name LONGHURST, BRACKEN
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135

Title DIRECTOR, PRESIDENT
Name BOWERS, DANIEL
Address 100 PREMIUM WAY
City-State-Zip: ALAMOSA CO 81101

Title VP, DIRECTOR
Name EDGAR, BRENDA
Address 100 PREMIUM WAY
City-State-Zip: ALAMOSA CO 81101

Title TREASURER, DIRECTOR
Name MCCULLOUGH, CASSIDY
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135

Title VP, DIRECTOR
Name RODRIGUEZ, GABRIEL
Address 5585 ERINDALE DR.
City-State-Zip: COLORADO SPRINGS CO 80918

Title VP, DIRECTOR
Name STUMPF, DOUGLAS G.
Address 119 N 3RD ST.
City-State-Zip: STERLING CO 80751

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROCKY HALLOWS

**ASST. CORP.
SECRETARY**

04/10/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, VP
Name WORKMAN, REBECCA
Address 119 N 3RD AVE.
City-State-Zip: STERLING CO 80751

Title DIRECTOR
Name LEAVITT, MARK O.
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135

Title ASST. SECRETARY
Name HALLOWS, ROCKY
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135

Title DIRECTOR
Name LEAVITT, ERIC O.
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135

Title DIRECTOR
Name CALLISTER, JOSEPH
Address PO BOX 130
City-State-Zip: CEDAR CITY UT 84721-0135