

## Annual Report Form

1998

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

\* FIRST NOTICE \*

1. Mailing Address - Please Correct, If Not Correct

NATURAL FITNESS, INC.

TIM MARTIN

1103 SUPERIOR

SANDPOINT

ID 83864

CHARLTON MILLS  
517 N. FOURTH AVE.

SANDPOINT ID 83864

3. Organized Under the Laws of:

ID

C 88089

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

Office heldNameStreet or P.O. AddressCityStateZip

PRES./V.P.

TIM MARTIN

114 OLSON RD.

SAGLE

ID

83860

SEC./TREAS.

SHARON I. MARTIN

"

"

"

"

5. Signature of New Registered Agent

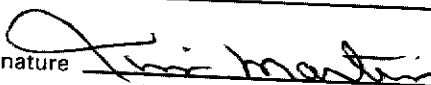
6.

Signature

Name (Typed or Printed)

Date

Title



TIM MARTIN

7/29/98

President

ISSUED: 07-03-1998

DO NOT TAPE OR STAPLE

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