


No. C 145564	Due no later than September 30, 2005		2. Registered Agent and Office 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	Annual Report Form		NATIONAL REGISTERED AGENTS INC												
	1. Mailing Address - Correct in this box, if applicable HEALTH FITNESS CORPORATION 3600 AMERICAN BLVD WEST STE 560 MINNEAPOLIS, MN 55431		1423 TYRELL LN BOISE, ID 83706 3. <u>New</u> Registered Agent Signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td colspan="6" style="text-align: center;">See Attached</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	See Attached					
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See Attached															
5. Organized Under the Laws of: MINNESOTA C 145564	6. Signature  Date <u>11-16-05</u> Name (Typed or Printed) <u>Wesley W. Winnekins</u> Title <u>CFO</u>														

**OFFICERS/DIRECTORS
HEALTH FITNESS CORPORATION**

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President/CEO/Director

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Treasurer/CFO

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V.P. of Operations

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V.P. of Human Resources/Secretary

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