


No. <b>W 147725</b>	<b>Due no later than Feb 28, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> KIRK F BROWN 5060 E FRAZIER DR POST FALLS ID 83854
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> KIRK BROWN PERSONAL TRAINING, LLC KIRK F BROWN 5060 E FRAZIER DR POST FALLS ID 83854		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
<b>Manager or Member</b>	<b>Name</b>	<b>Street or PO Address</b>	<b>City State Country Postal Code</b>
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	KIRK BROWN	5060 E Frazier Dr.	Post Falls, ID 83854
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
5. Organized Under the Laws of:		6.	
IDAHO W 147725		Signature: 	Date: <u>3/16/17</u>
		Name (type or print): <u>KIRK F BROWN</u>	Title: <u>Member</u>
Issued 03/16/2017 by online		130598	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM