

No. <b>W 73994</b>		<b>Due no later than May 31, 2010</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  IN-SHAPE, LLC SHARON KNOX 4553 N EAGLE POINT PL STAR ID 83669		SHARON KNOX 4553 N EAGLE POINT PL STAR ID 83669			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	SHARON KNOX	4553 N EAGLE POINT PL	STAR	ID	USA	83669	
MEMBER	BRUCE KNOX	4553 N EAGLE POINT PL	STAR	ID	USA	83669	
5. Organized Under the Laws of:  <b>ID</b> <b>W 73994</b>		6. Annual Report must be signed.*  Signature: Sharon Knox Name (type or print): Sharon Knox					
		Date: 03/25/2010 Title: Member					
Processed 03/25/2010		* Electronically provided signatures are accepted as original signatures.					