INSTRUCTIONS ON REVERSE SIDE

No. 420

Idaho Limited Liability Company Annual Report Form

Due No Later Than November 1,

REINSTATEMENT

Return To
Secretary of State
Room 203, Statehouse
P.O. BOX 83720
Boise, ID 83720-0080

FEB 27 '96

SECRETARY OF STATE

FORFEITED 12/1/95
FEE DUE: $10.00

1. Mailing Address — *Please Correct, If Not Correct*

HOLLOWAY HEALTH CLUBS, L.C.
DOUGLAS R. HOLLOWAY
~~1009 W HEMINGWAY BLVD~~ 10218 Fairview Ave.
~~NAMPA ID 83651~~
Boise, ID 83704

2. Registered Agent and Office NOT A P.O. BOX

DOUGLAS R. HOLLOWAY
~~1009 W HEMINGWAY BLVD~~
~~NAMPA ID 83651~~

3. Organized Under The Laws of Idaho #420

4. Names and Addresses of ☐ Managers or ☒ Members (check one)

MUST BE PRINTED OR TYPED

Name	Street or P.O. Address	City	State	Zip
Douglas R. Holloway	10218 Fairview Ave.	Boise	ID	83704
Linda M. Holloway	10218 Fairview Ave.	Boise	ID	83704

5. Signature of the Current Registered Agent (if changed in block 2)

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature

Name (Typed or Printed) Douglas R. Holloway

Date 2-26-96