No. W 97643		Due no later than Nov 30, 2012			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHAEL WILSON 2228 MAIN ST BOISE ID 83702				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. BFIT EXERCISE CENTER LLC MICHAEL D WILSON 6360 GRANDVIEW DR BOISE ID 83709 USA						
					3. New 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
MANAGER MICH	AEL D	WILSON	2228 MAIN ST.		BOISE	ID	USA	83702
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 97643		Signature: Michael D Wilson			Date: 09/15/2012			
		Name (type or print): Michael D Wilson			Title: Owner/Operator			
Processed 09/15/2012 * Electronically provided signatures are accepted as original signatures.								