

No. **W 38885**

**Due no later than April 30, 2006**  
**Annual Report Form**

Return to:  
**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 applicable**

**TOTAL HEALTH & FITNESS, LLC**  
**BRIAN K JEPSEN**  
**150 S MAIN #7 #17**  
**MALAD CITY, ID 83252**

**2. Registered Agent and Office **NO PO BOX****

**BRIAN K JEPSEN**  
150 S MAIN #7  
MALAD CITY, ID 83252

**3. New Registered Agent Signature**

**4. Limited Liability Companies: Enter Names and Addresses of Managers.**

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
OWNER	ANITA JEPSEN	190 N. 70 E.	MALAD	ID	83252
OWNER	BRIAN JEPSEN	190 N. 70 E.	MALAD	ID	83252

**5. Organized Under the Laws of:**

**IDAHO**  
**W 38885**

**6.**

**Signature**

(Typed or  
Printed)

**BRIAN K. JEPSEN**

**Date** 1/11/06

**Title** Owner