

No. <b>W 34708</b>		<b>Due no later than Nov 30, 2009</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		CRAIG RENCHER 1148 HARMONY RD TWIN FALLS ID 83301			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		TWIN FALLS FITNESS CENTER, LLC CONNIE J RENCHER 1148 HARMONY RD TWIN FALLS ID 83301					
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	CRAIG RENCHER	1148 HARMONY	TWIN FALLS	ID	USA	83301	
MANAGER	CONNIE RENCHER	1148 HARMONY	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 34708</b>		Signature: Craig J Rencher				Date: 11/06/2009	
		Name (type or print): Craig J Rencher				Title: Manager	
Processed 11/06/2009		* Electronically provided signatures are accepted as original signatures.					