

No. <b>W 122149</b>		<b>Due no later than Feb 28, 2018</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>  FITNESS PLACE, LLC SARAH SCHROEDER 6240 LAKE OSPREY DR SARASOTA FL 34240		RANDY SIDDOWAY 12592 W. EXPLORER DRIVE STE. 125 BOISE ID 83713			
<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 MEMBER	Name SARAH SCHROEDER	Street or PO Address 6240 LAKE OSPREY DRIVE		City SARASOTA	State FL	Country USA	Postal Code 34240
5. Organized Under the Laws of:  <b>ID</b> <b>W 122149</b>		6. Annual Report must be signed.*  Signature: Sarah Schroeder Name (type or print): Sarah Schroeder  Date: 01/03/2018 Title: Member					
Processed 01/03/2018 * Electronically provided signatures are accepted as original signatures.							