

No. W 57885	Due no later than Jan 31, 2011 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
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 needed.		ELIZABETH A RANKIN 116 SPRUCE ASHTON ID 83420			
	TOTAL HEALTH AND FITNESS CENTER, LLC ELIZABETH A RANKIN PO BOX 400 ASHTON ID 83420 USA		3. <u>New</u> 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	ELIZABETH A RANKIN	116 SPRUCE	ASHTON	ID	USA	83420
5. Organized Under the Laws of: ID W 57885		6. Annual Report must be signed.* Signature: Elizabeth Rankin Name (type or print): Elizabeth Rankin Date: 03/01/2011 Title: Manager				
Processed 03/01/2011		* Electronically provided signatures are accepted as original signatures.				