


<b>No. W 5093</b>	<b>Due no later than December 31, 2006</b> <b>Annual Report Form</b>		<b>2. Registered Agent and Office 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>1. Mailing Address - Correct in this box, if applicable</b>  ROCKY MOUNTAIN FITNESS & RECREATION RICHARD P CRAYCROFT 875 E PLAZA DR STE 101 EAGLE, ID 83616		RICHARD P CRAYCROFT 875 E PLAZA DR EAGLE, ID 83616  <b>3. New Registered Agent Signature</b>																			
<b>4. Limited Liability Companies: Enter Names and Addresses of Managers.</b> <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Manager</td> <td>Reid P Merrill</td> <td>435 W. Two Rivers</td> <td>Eagle</td> <td>Id</td> <td>83616</td> </tr> <tr> <td>Manager</td> <td>Richard P Craycroft</td> <td>685 E. STATE ST F204</td> <td>Eagle</td> <td>Id</td> <td>83616</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Reid P Merrill	435 W. Two Rivers	Eagle	Id	83616	Manager	Richard P Craycroft	685 E. STATE ST F204	Eagle	Id	83616
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<b>5. Organized Under the Laws of:</b>  IDAHO W 5093		<b>6.</b> Signature  Date <u>11-6-06</u> Name (Typed or Printed) <u>Richard P Craycroft</u> Title <u>Manager</u>																				

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Do Not Tape or Staple

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