

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000005434

FILED
Jan 04, 2010
Secretary of State

Entity Name: BALLY TOTAL FITNESS CORPORATION

Current Principal Place of Business:

8700 W BRYN MAWR AVENUE
3RD FLOOR
CHICAGO, IL 60631 US

New Principal Place of Business:

Current Mailing Address:

8700 W BRYN MAWR AVENUE
3RD FLOOR
CHICAGO, IL 60631 US

New Mailing Address:

FEI Number: 36-2762953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SVP
Name: FANELLI, WILLIAM
Address: 8700 WEST BRYN MAWR AVENUE
City-St-Zip: CHICAGO, IL 60631

Title: CFO
Name: FANELLI, WILLIAM
Address: 8700 WEST BRYN MAWR AVE
City-St-Zip: CHICAGO, IL 60631

Title: T
Name: REHORST, SUSAN
Address: 8700 WEST BRYN MAWR AVENUE
City-St-Zip: CHICAGO, IL 60631

Title: SVPS
Name: KATHLEEN, BOEGE
Address: 8700 WEST BRYN MAWR AVE
City-St-Zip: CHICAGO, IL 60631

Title: AS
Name: ACQUAVIVA, EARL
Address: 8700 WEST BRYN MAWR AVE
City-St-Zip: CHICAGO, IL 60631

Title: AS
Name: SIEGEL, RONALD E
Address: 8700 WEST BRYN MAWR
City-St-Zip: CHICAGO, IL 60631

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RONALD E. SIEGEL

AS

01/04/2010

Electronic Signature of Signing Officer or Director

Date