



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02901-2615
(401) 222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c)(d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 129704		2. Name of Corporation SALLY FITNESS, INC.		
3. Street Address Principal Business Office 1000 Division Street		City East Greenwich	State RI	Zip 02818
4. Business Phone No. (401) 722-6600		5. State of Incorporation RHODE ISLAND		
6. Brief Description of the Character of Business Conducted in Rhode Island TO OWN, MANAGE AND OPERATE A PHYSICAL FITNESS FACILITY.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name BARRY H. FIELD		Vice President Name NONE.		
Street Address 38 Tremlett Street		Street Address		
City Dorchester	State MA	Zip 02124	City	State
Secretary Name MICHAEL J. FIELD		Treasurer Name MARLA E. DIRECTOR		
Street Address 529 Shippeetown Road		Street Address 42 Oakwood Road		
City East Greenwich	State RI	Zip 02818	City Newtonville	State MA
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name BARRY H. FIELD		Director Name MARLA E. DIRECTOR		
Street Address 38 Tremlett Street		Street Address 42 Oakwood Road		
City Dorchester	State MA	Zip 02124	City Newtonville	State MA
Director Name MICHAEL J. FIELD		Director Name		
Street Address 529 Shippeetown Road		Street Address		
City East Greenwich	State RI	Zip 02818	City	State
9. SHARES AUTHORIZED 600; Common; No Par Value				
10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
ISSUED SHARES — THIS SECTION MUST BE COMPLETED				
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		Number of Shares 100	Class Series Common	Par Value No Par Value

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date 3-5-2010
Check No. 2142
By: mnc

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature Barry H. Field Date 2/2/10
BARRY H. FIELD
Print or Type Name
PRESIDENT
Title