#### Health Fitness Corp /MN/ Form 3 June 08, 2005 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31,

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Expires:

response...

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2005

0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Zdychnec Michael				<ul><li>2. Date of Event Requiring Statement</li><li>(Month/Day/Year)</li></ul>	3. Issuer Name and Ticker or Trading Symbol Health Fitness Corp /MN/ [HFIT]					
(Las	t) (	(First)	(Middle)	05/31/2005		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
3600 AMERICAN BOULEVARD WEST, SUITE 560				(Check all applicable)						
	(	Street) Director 10% Ow X Officer Other (give title below) (specify below) VP of Marketing				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting				
MINNEAPOLIS, MN 55431							Person Form filed by More than One Reporting Person			
(City	y) (	State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned						
1.Title c (Instr. 4	of Security )			Ber	Amount of neficially C str. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•	
Reminder: Report on a separate line for each class of secu owned directly or indirectly.				ch class of securitie	es beneficia	ally S	EC 1473 (7-02)	)		
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#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	Expiration D	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

Shares	or Indirect
	(I)
	(Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
ForB o -	Director	10% Owner	Officer	Other			
Zdychnec Michael 3600 AMERICAN SUITE 560 MINNEAPOLIS,	Â	Â	VP of Marketing	Â			
Signatures							
Michael Zdychnec	06/08/2005						
<u>**</u> Signature of Reporting Person	Date						

# **Explanation of Responses:**

### No securities are beneficially owned

\* If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.