

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000121678

Entity Name: CROSSFIT TARPON SPRINGS, LLC

Current Principal Place of Business:

41522 U.S. HIGHWAY 19N
SUITE 2
TARPON SPRINGS, FL 34689

Current Mailing Address:

41522 U.S. HIGHWAY 19N
SUITE 2
TARPON SPRINGS, FL 34689 US

FEI Number: 46-3532126

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EDWARDS, STEVEN C
3102 PINEVIEW DR
HOLIDAY, FL 34691 US

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

Authorized Person(s) Detail :

Title MGRM
Name CASSIDY, JAMES
Address 2681 RACHEL CT
City-State-Zip: PALM HARBOR FL 34684

Title MGRM
Name EDWARDS, STEVEN
Address 3102 PINEVIEW DR
City-State-Zip: HOLIDAY FL 34691

Title MGRM
Name HOWE, DAVID B
Address 1265 N JASMINE AVE
City-State-Zip: TARPON SPRINGS FL 34689

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES CASSIDY

MANAGING MEMBER

04/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date