

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000121678

Entity Name: CROSSFIT TARPON SPRINGS, LLC

Current Principal Place of Business:

425 E SPRUCE ST UNIT D
TARPON SPRINGS, FL 34689

Current Mailing Address:

425 E SPRUCE ST UNIT D
TARPON SPRINGS, FL 34689

FEI Number: 46-3532126

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EDWARDS, STEVEN C
425 E SPRUCE ST UNIT D
TARPON SPRINGS, FL 34689 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 8621 RACHEL CT
City-State-Zip: PALM HARBOR FL 34684

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

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

03/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date