

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000060876

**Entity Name:** CROSSFIT HAVOC, LLC

**Current Principal Place of Business:**

1700 14TH AVE E  
PALMETTO, FL 34221

**Current Mailing Address:**

4403 TROUT RIVER XING  
ELLENTON, FL 34222

**FEI Number: 46-5436025**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

DENOFA, JAMES  
4403 TROUT RIVER XING  
ELLENTON, FL 34222 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	AMBR	Title	AMBR
Name	DENOFA, NATASHA	Name	DENOFA, JAMES
Address	4403 TROUT RIVER XING	Address	4403 TROUT RIVER XING
City-State-Zip:	ELLENTON FL 34222	City-State-Zip:	ELLENTON FL 34222

*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: NATASHA DENOFA**

**MANAGER**

**02/18/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date