

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000030799

Entity Name: CROSSFIT HURT INC**Current Principal Place of Business:**4201 SW 6TH AVE
CAPE CORAL, FL 33914**Current Mailing Address:**4201 SW 6TH AVE
CAPE CORAL, FL 33914**FEI Number:** 46-5342319**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TODD, FRANK
4201 SW 6TH AVE
CAPE CORAL, FL 33914 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**Officer/Director Detail :**

Title	P
Name	TODD, FRANK
Address	4201 SW 6TH AVE
City-State-Zip:	CAPE CORAL FL 33914

Title	T
Name	TODD, FRANK
Address	4201 SW 6TH AVE
City-State-Zip:	CAPE CORAL FL 33914

Title	DIRECTOR
Name	BIZZARRO, BRIAN
Address	3781 WINKLER AVE 422
City-State-Zip:	FORT MYERS FL 33916

Title	VP
Name	TODD, MELISSA
Address	4201 SW 6TH AVE
City-State-Zip:	CAPE CORAL FL 33914

Title	S
Name	TODD, MELISSA
Address	4201 SW 6TH AVE
City-State-Zip:	CAPE CORAL FL 33914

Title	DIRECTOR
Name	BIZZARRO, CORINNE
Address	3781 WINKLER AVE 422
City-State-Zip:	FORT MYERS FL 33916

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK TODD**PRESIDENT****02/01/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date