

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003554

FILED  
Apr 16, 2012  
Secretary of State

Entity Name: ON THE WILD SIDE, INC.

## Current Principal Place of Business:

2654 WOLF HOLLOW DRIVE  
32455  
PONCE DE LEON, FL 32455 US

## New Principal Place of Business:

## Current Mailing Address:

2654 WOLF HOLLOW DRIVE  
32455  
PONCE DE LEON, FL 32455 US

## New Mailing Address:

FEI Number: 20-0014974      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SORVILLO, JOSEPH  
2654 WOLF HOLLOW DRIVE  
32455  
PONCE DE LEON, FL 32455 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: CP  
Name: SORVILLO, JOSEPH  
Address: 2654 WOLF HOLLOW DRIVE  
City-St-Zip: PONCE DE LEON, FL 32455 US

Title: DST  
Name: SORVILLO, CAROL A  
Address: 2654 WOLF HOLLOW DRIVE  
City-St-Zip: PONCE DE LEON, FL 32455 US

Title: D  
Name: HABEREK, HELEN J  
Address: 2654 WOLF HOLLOW DRIVE  
City-St-Zip: PONCE DE LEON, FL 32455 US

Title: VPD  
Name: DARMETKO, DANIEL B  
Address: 2914 NE 8TH TERR #101  
City-St-Zip: OAKLAND PARK, FL 33334 US

Title: D  
Name: OWENS, DANIAL C  
Address: 2643 OLD MILL ROAD  
City-St-Zip: PONCE DE LEON, FL 32455 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROL A SORVILLO

DST

04/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date