

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000010829

**Entity Name:** WOLFPACK LION PIZZA CORPORATION

**Current Principal Place of Business:**

1500 NW 16TH AVE 244  
GAINESVILLE, FL 32605

**Current Mailing Address:**

PO BOX 142622  
GAINESVILLE, FL 32608

**FEI Number:** 47-3079217

**Certificate of Status Desired:** No

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

HIPPLER, CHANCE  
1500 NW 16TH AVE 244  
GAINESVILLE, FL 32605 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 HIPPLER, CHANCE  
Address 1500 NW 16TH AVE 244  
City-State-Zip: GAINESVILLE FL 32605

*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:** CHANCE HIPPLER

**PRESIDENT**

**03/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date