

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 524721

Entity Name: AWF, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

646 E. PLANT ST.  
WINTER GARDEN, FL 34787 US

## New Principal Place of Business:

## Current Mailing Address:

646 E. PLANT ST.  
WINTER GARDEN, FL 34787 US

## New Mailing Address:

FEI Number: 59-1713263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNIGHT, TERRY D  
722 NE 4TH ST  
CHIEFLAND, FL 32644 US

## Name and Address of New Registered Agent:

KNIGHT, TERRY D  
3406 SW 122ND ST  
GAINESVILLE, FL 32608 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: KNIGHT, TERRY D MRS  
Address: 722 NE 4TH ST  
City-St-Zip: CHIEFLAND, FL 32644 US

Title: VD ( ) Delete  
Name: KNIGHT, PETER R MR  
Address: 237 N. CENTRAL AVE  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D ( ) Delete  
Name: KNIGHT, WILLIAM E MR  
Address: 722 NE 4TH ST  
City-St-Zip: CHIEFLAND, FL 32644 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: KNIGHT, TERRY D MRS  
Address: 3406 SW 122ND ST  
City-St-Zip: GAINESVILLE, FL 32608 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY D KNIGHT

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date