

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000012819

**Entity Name:** AWKNG, INC.

**Current Principal Place of Business:**

9978 VINEYARD LAKE RD  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

PO BOX 23621  
JACKSONVILLE, FL 32241 US

**FEI Number:** 85-3914697

**Certificate of Status Desired:** No

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

ADCOX, KARLA  
9978 VINEYARD LAKE RD  
JACKSONVILLE, FL 32256 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:** KARLA ADCOX

02/09/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           SCHWARTZ, BRYAN  
Address        PO BOX 23621  
City-State-Zip: JACKSONVILLE FL 32241

Title           PRESIDENT  
Name           ADCOX, KARLA  
Address        PO BOX 23621  
City-State-Zip: JACKSONVILLE FL 32241

Title           DIRECTOR  
Name           WEEMS, CHARLES STOVALL  
Address        PO BOX 23621  
City-State-Zip: JACKSONVILLE FL 32241

Title           SECRETARY  
Name           WILSON, DAWN  
Address        PO BOX 23621  
City-State-Zip: JACKSONVILLE FL 32241

*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:** KARLA ADCOX

**PRESIDENT**

02/09/2022

Electronic Signature of Signing Officer/Director Detail

Date