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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

725427

(9)

IRONWOOD, INC.

| rincipal Place of Business | Mailing Address |
|----------------------------|----------------------|
| 28 BRISTLECONE LANE | 528 BRISTLECONE LANE |
| IAPLES FL 33982 | NAPLES FL 34113-8352 |

FILED Mar 17 1997 8:00am Secretary of State

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| | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report | | |
|--|--|---------------------------------------|---|--|--|--|
| | | | | 01/31/1973 03/26/1996 | | |
| 2. Principal Place of Business 2a. Mailing Address | | 2a. Mailing Address | | 4. FEI Number Applied For | | |
| 21 26 | | | 59-1576247 Not Applicable | | | |
| | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired See Required Fee Required | | |
| 22 27 | | City & State | | | | |
| City & State | | <u>⊢</u> | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution | | |
| Zip | Country | 28 | Country | This corporation has liability for intangible tax under s. 199.032, | | |
| 24 | 25 | 29 30 | ¬ ' | Florida Statutes Yes No | | |
| 241 | 9. Name and Address of Curren | | 1 | 10. Name and Address of New Registered Agent | | |
| | 81 Name | | | | | |
| WHITE, LAURAINE L | | | White, Lauraine L. 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | NANCIAL MOMT SERVICES | | c/o Financial Mgmt Services | | | |
| | AMIAMI TRAIL N. #223 | | 83 4933 Tamiami Trl. N., #200 | | | |
| | S FL 33940 | | 84 City | 85 Zip Code | | |
| | | | 1,1,1,1,1 | Naples. FL 34103 | | |
| 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered | | | | | | |
| 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lamiliar with, and accept the obligations of Section 617 0503, Florida Statutes. | | | | | | |
| SIGNATURE | | | | | | |
| 12. | Signature, typed or printed name of registered age OFFICERS ANI | | legistered Agent signature r | equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | D | DELETE | 1.1 TITLE | D Change Addition | | |
| NAME | MICHENER, MILTON | | 1.2 NAME | Michener, Milton | | |
| STREET ADDRESS | 422 BRISTLECONE LANE | | 1.3 STREET ADDRESS | 422 Bristlecone Lane | | |
| CITY-ST-ZIP | NAPLES FL | A | 1.4 C(TY+ST+Z)P | Naples, FL 34113-8352. | | |
| TITLE | PD | DELETE | 21 TITLE | VPD Change Addition | | |
| NAME | NAYLOR, NANCY | | 22 NAME | Wayne LiFleur | | |
| - Announces | 452 BHISTLECONE LANE | | 2 3 STREET ADDRESS | 500 Bristlecone Lane | | |
| CITY-ST-ZIP | NAPLES FL | | 2 4 CITY-ST-ZIP | Naples, FL 34113 - 8352 | | |
| TITLE | ATD | ☐ DELETE | 3 1 TITLE | TD Change Addition | | |
| NAME | SCHMIDT, MARY | | 3.2 NAME | Schmidt, Mary | | |
| STREET ADDRESS | 404 BRISTLECONE LANE | | 3.3 STREET ADDRESS | 404 Bristlecone Lane | | |
| CITY-ST-ZIP | NAPLES FL | DELETE | 3.4. CITY-ST-ZIP | Naples, FL 34113-8352. | | |
| TITLE | TD ANILED IANET C | DELETE | 4.1 TITLE | SD | | |
| NAME | MILLER, JANET G. 436 BRISTLE CONE LN | | 4.2 NAME | Ruth Shepherd | | |
| STREET ADDRESS | NAPLES, FL 00000 | | 4.3 STREET ADDRESS | 504 Bristlecone Lane | | |
| CITY-ST-ZIP TITLE | SD | DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | Naples, FL 34113-8352 | | |
| NAME | DERRY, JOYCE | | 5.2 NAME | FD - | | |
| STREET ADDRESS | 496 BRISTLWCONE LANE | | 5.3 STREET ADDRESS | Derry, Joyce | | |
| CITY-ST-ZIP | NAPLES FL | | 5.4 CITY-ST-ZIP | 496 Bristlecone Lane Naples, FL 34113-8352 | | |
| TITLE | D | DELETE | 6.1 TITLE | D Change Addition | | |
| NAME | MCLAUGHLIN, CHARLES | | 6.2 NAME | N. F. Whitney | | |
| STREET ADDRESS | 490 BRISTLECONE LANE | O.K. | 6.3 STREET ADDRESS | 468 Brightecone Lane | | |
| City-ST-ZIP | NAPLES FL | U.N. | 6.4 CITY - ST - ZIP | Naples FL 34/13-8352 | | |
| 44 Ldo boro | by cartify that the information cumplicy | d with this filing door not qualify t | for the exemption et | ated in Section 119 07/3/i) Florida Statutes I further certify that the | | |

I do nereby certify that the information supplied with this fling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.