2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725427

Entity Name: IRONWOOD, INC.

Apr 25, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

528 BRISTLECONE LANE NAPLES, FL 33962

Current Mailing Address: New Mailing Address:

GUARDIAN PROPERTY MGMT 6700 LONE OAK BLVD NAPLES, FL 34109

FEI Number: 59-1576247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GUARDAIN PROPERTY MGMT 6700 LONE OAK BLVD NAPLES, FL 34109

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:

Title:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete REYNOLDS, JACK DERRY, JOYCE Name: Name: 428 BRISTLCONE LANE Address: 496 BRISTLCONE LANE Address: City-St-Zip: NAPLES, FL 341138352 City-St-Zip: NAPLES, FL 34113

Title: () Delete Title: (X) Change () Addition MITCHELL, ROBERT Name: MITCHELL, ROBERT Name:

Address: 522 BRISTLECONE LANE Address: 458 BRISTLECONE LANE City-St-Zip: NAPLES, FL 34113 City-St-Zip: NAPLES, FL 34113

Title: () Delete Title: (X) Change () Addition

WEINRICH, AUDREY Name: WEINRICH, AUDREY Name: 490 BRISTLECONE LANE 522 BRISTLECONE LANE Address: Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip: NAPLES, FL 34113

Title: PD () Delete Title: (X) Change () Addition

DERRY, JOYCE Name: Name: HICKLING, ELIZABETH 496 BRISTLWCONE LANE 458 BRISTLECONE LANE Address: Address: City-St-Zip: NAPLES, FL 341138352 City-St-Zip: NAPLES, FL 34113

Title: VPD () Delete Title: (X) Change () Addition

HICKLING, DAVID ROBERTS, PAT Name: Name: 448 BRISTLECONE LANE 490 BRISTLECONE LANE Address: Address: City-St-Zip: NAPLES, FL 341138352 City-St-Zip: NAPLES, FL 34113

() Delete Title: (X) Change () Addition POLLAK, PATRICIA POLLACK, PATRICIA Name: Name: Address: 492 BRISTLECONE LANE Address: 492 BRISTLECONE LANE NAPLES, FL 34113 NAPLES, FL 34113 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BYRON ROSS MGR 04/25/2006