

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State

05-21-2007 90049 047 ****61.25

DOCUMENT # 725427		
1. Entity Name IRONWOOD, INC.		

Principal Place of Business 528 BRISTLECONE LANE NAPLES, FL 33962	Mailing Address GUARDIAN PROPERTY MGMT 6700 LONE OAK BLVD NAPLES, FL 34109
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>P.O. Box 110156</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>Naples, FL</i>	
Zip	Country	Zip <i>34108</i>	Country

40116734



05032007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1576247	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GUARDIAN PROPERTY MGMT 6700 LONE OAK BLVD NAPLES, FL 34109

7. Name and Address of New Registered Agent	
Name <i>William D White</i>	
Street Address (P.O. Box Number is Not Acceptable) <i>2310 Della Dr</i>	
City <i>Naples</i>	FL Zip Code <i>34117</i>

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *William D White* 5-1-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DERRY, JOYCE 496 BRISTLECONE LANE NAPLES, FL 34113 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MITCHELL, ROBERT 458 BRISTLECONE LANE NAPLES, FL 34113 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WEINRICH, AUDREY 522 BRISTLECONE LANE NAPLES, FL 34113 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HICKLING, ELIZABETH 458 BRISTLECONE LANE NAPLES, FL 34113 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROBERTS, PAT 490 BRISTLECONE LANE NAPLES, FL 34113 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POLLACK, PATRICIA 492 BRISTLECONE LANE NAPLES, FL 34113 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Donahue, Jim 460 Bristlecone Lane Naples, FL 34113 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Morrill, Bill 438 Bristlecone Lane Naples, FL 34113 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT EFTHEMIS, John 52 Hastings Dr Orchard Park, NY 14127 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MORENO, LINDA 418 BRISTLECONE LANE Naples, FL 34113 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Roberts, Pat. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAS WHITE, WILLIAM D 2310 Della Dr Naples, FL 34117 ☒ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *William D White* 5-4-07 239-352-6780
Signature and typed or printed name of signing officer or director Date Daytime Phone #