2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# 725427

Entity Name: IRONWOOD, INC.

Current Principal Place of Business:

528 BRISTLECONE LANE
NAPLES, FL 33962

New Principal Place of Business:

Current Mailing Address:

PO BOX 110156
NAPLES, FL 34108

New Mailing Address:

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

Name and Address of Current Registered Agent:

WHITE, WILLIAM
2310 DELLA DR.
NAPLES, FL 34117 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DONAHUE, JIM
Address: 460 BRISTLECONE LN.
City-St-Zip: NAPLES, FL 34113

Title: D ( ) Delete
Name: BREARTON, JIM
Address: 412 BRISTLCONE LANE
City-St-Zip: NAPLES, FL 34113

Title: DT ( ) Delete
Name: EFTHEMIS, JOHN
Address: 52 HASTINGS DR.
City-St-Zip: ORCHARD PARK, NY 14127

Title: SD ( ) Delete
Name: MORENO, LINDA
Address: 418 BRISTLECONE LN.
City-St-Zip: NAPLES, FL 34113

Title: D ( ) Delete
Name: KENNEDY, DAVE
Address: 452 BRISTLECONE LANE
City-St-Zip: NAPLES, FL 34113

Title: MAS ( ) Delete
Name: WHITE, WILLIAM
Address: 2310 DELLA DR.
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: JOYCE, DERRY
Address: 496 BRISTLECONE LN.
City-St-Zip: NAPLES, FL 34113

Title: DVP (X) Change ( ) Addition
Name: BELL, TIM
Address: 406 BRISTLECONE LANE
City-St-Zip: NAPLES, FL 34113

Title: DT (X) Change ( ) Addition
Name: MILLER, JANET G
Address: 436 BRISTLECONE LANE
City-St-Zip: NAPLES, FL 34113

Title: SD (X) Change ( ) Addition
Name: NAYLOR, NANCY
Address: 494 BRISTLECONE LN.
City-St-Zip: NAPLES, FL 34113

Title: D (X) Change ( ) Addition
Name: MITCHELL, BOB
Address: 522 BRISTLECONE LANE
City-St-Zip: NAPLES, FL 34113

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM D. WHITE MAS 04/16/2009

Electronic Signature of Signing Officer or Director — Date