2003 NOT-FOR-PROFIT CORPORATION

FILED Apr 14, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 725427** 1. Entity Name 04-14-2003 90101 045 ****61.25 IRONWOOD, INC. Principal Place of Business Mailing Address 528 BRISTLECONE LANE C/O DIANA GURGES 3400 TAMIAMI TR., N. #202 NAPLES FL 33962 NAPLES FL 34103 2. Principal Place of Business 3. Mailing Address Suite, Apt. # etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State 4. FEi Number 59-1576247 Applied For City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **GURGES. DIANA** Street Address (P.O. Box Number is Not Acceptable) 3400 TAMIAMI TRAIL N. SUITE 202 NAPLES FL 34103 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Addition TITLE ☐ Delete TITLE ☐ Change REYNOLDS, JACK NAME NAME STREET ADDRESS STREET ADDRESS **428 BRISTLCONE LANE** CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34113-8352 Change TITLE Delete TITI F Addition MITCHELL, ROBERT NAME MAME STREET ADDRESS **522 BRISTLECONE LANE** STREET ADDRESS CITY-ST-ZIP. CITY_ST-ZIP_ NAPLES FL-34113 ----Delete TITLE ☐ Change Addition HALSTRAD, MARIE NAME NAME STREET ADDRESS STREET ADDRESS **422 BRISTLECONE LANE** CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34113 PD ☐ Delete TITLE Change ☐ Addition TITLE NAME DERRY, JOYCE NAME **496 BRISTLWCONE LANE** STREET ADDRESS STREET ADDRESS

NAPLES FL 34113 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

NAPLES FL 34113-8352

448 BRISTLECONE LANE

420 BRISTLECONE LANE

NAPLES FL 34113-8352

HIEKLING, DAVID

METER, LENA

VD.

☐ Delete

Delete

4-12-03

239-732-0813

Change

Change .

☐ Addition

Addition