2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2004 8:00 am
Secretary of State
03-15-2004 90094 015 ****61.25

DOCUMENT # 755445

1. Entity Name
IRONWOOD NO. I HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O DICKINSON MGMT, INC 400 TONEY PENNA DRIVE JUPITER, FL 33458 US	C/O DICKINSON MGMT, INC 400 TONEY PENNA DRIVE JUPITER, FL 33458 US

02232004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2267852 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ST JOHN, DICKER, KRIVOK & CORE, PA 1818 AUSTRALIAN AVE SO. STE 400 WEST PALM BEACH, FL 33409	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	☑ Delete	TITLE	President	☒ Change ☐ Addition
NAME	POTREKUS, JACK		NAME	~~Rick~~ Denning, Richard R.	
STREET ADDRESS	48 IRONWOOS WAY		STREET ADDRESS	11 Ironwood Way	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE	D	☑ Delete	TITLE	V.P.	☐ Change ☒ Addition
NAME	LIBERI, LINDA		NAME	Jack Ryan	
STREET ADDRESS	40 IRONWOOD WAY		STREET ADDRESS	18 Ironwood Way	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE	D	☑ Delete	TITLE	SECRETARY/TREASURER	☐ Change ☑ Addition
NAME	VELLAVECES, MAURICIO		NAME	Ruth Harris	
STREET ADDRESS	83 IRONWOOD WAY		STREET ADDRESS	26 Ironwood Way	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE	D	☑ Delete	TITLE	Director	☐ Change ☑ Addition
NAME	DENNING, RICK		NAME	Linda Huffman	
STREET ADDRESS	11 IRON WAY		STREET ADDRESS	11 Ironwood Way	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE	ST	☑ Delete	TITLE	DIRECTOR	☐ Change ☑ Addition
NAME	BENNETT, DAWN		NAME	MARY Tournaben	
STREET ADDRESS	60 IRONWOOD WAY		STREET ADDRESS	16 Ironwood Way	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens FL 33418	
TITLE	V	☑ Delete	TITLE	Director	☐ Change ☑ Addition
NAME	D'AGOSTINO, EDNA		NAME	Don Poyner	
STREET ADDRESS	26 IRONWOOD WAY		STREET ADDRESS	7 Ironwood Way	
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418		CITY-ST-ZIP	Palm Beach Gardens, FL 33418	

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.

SIGNATURE: _____ 3/4/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #