

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037187

**FILED**  
**Sep 05, 2005**  
**Secretary of State**

**Entity Name:** IRONWOOD FUNDING, L.L.C.

**Current Principal Place of Business:**

1520 ROYAL PALM SQUARE BLVD.  
240  
FORT MYERS, FL 33919

**New Principal Place of Business:**

1520 ROYAL PALM SQUARE BLVD.  
SUITE 240  
FORT MYERS, FL 33919

**Current Mailing Address:**

1520 ROYAL PALM SQUARE BLVD.  
FORT MYERS, FL 33919

**New Mailing Address:**

1520 ROYAL PALM SQUARE BLVD.  
SUITE 240  
FORT MYERS, FL 33919

**FEI Number:** 86-1147667      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

STRAYHORN, MICHAEL  
1520 ROYAL PALM SQUARE BLVD.  
FORT MYERS, FL 33919 US

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

STRAYHORN, MICHAEL M  
1520 ROYAL PALM SQUARE BLVD.  
SUITE 240  
FORT MYERS, FL 33919 US

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: MICHAEL M. STRAYHORN

09/05/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STRAYHORN, MICHAEL M MGR  
Address: 1520 ROYAL PALM SQUARE BLVD  
City-St-Zip: FT. MYERS, FL 33919

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: STRAYHORN, MICHAEL M MGRM  
Address: 1520 ROYAL PALM SQUARE BLVD, SUITE 240  
City-St-Zip: FT. MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL M. STRAYHORN

MGRM

09/05/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date