

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000011012

1. Entity Name

IRONWORKS UNLIMITED, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90119 040 ***150.00

Principal Place of Business

2327 NE 19TH DR
GAINESVILLE FL 32609
US

Mailing Address

P O BOX 5456
GAINESVILLE FL 32627-5456
US

2. Principal Place of Business

2421 NE 17TH TERRACE

3. Mailing Address

Suite, Apt. #, etc.

City & State

GAINESVILLE FL

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3291370

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITE, STEVE R
2101 SW 79TH DR
GAINESVILLE FL 32607

7. Name and Address of New Registered Agent

Name STEPHEN CONNER

Street Address (P.O. Box Number is Not Acceptable)

1106 PARK AVENUE

City ORANGE PARK

FL

Zip Code 32073

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.

SIGNATURE *Stephen R. Conner*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/20/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	WHITE, STEVE R	
STREET ADDRESS	2101 SW 79TH DR	
CITY-ST-ZIP	GAINESVILLE FL 32697	
TITLE	V	<input type="checkbox"/> Delete
NAME	WHITE, STEVE R	
STREET ADDRESS	2101 S.W. 79TH DRIVE	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen R. Conner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04/20/00

Daytime Phone #

352-376-6007

CR2E034 (9/99)