IRONWOOD PARTNERS, INC.					FILED			
47077N. Suite A	ce of Business W. 53rd Avenue ville, FL 32606	Mailing Address same as prir of busines	_	place	OO MAR - I AM II: IO SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS S	DO NOT WRITE IN THIS SPACE		
City & Stat	te	City & State		·	4. FEI Number	<u> </u>	plied For t Applicable	
Zip	Country	Zip	Countr	у		\$8.75 Add	litional	
	6. Name and Address of Curre	nt Registered Agent			7. Name and Address of New Registered A	gent		
			i	Name				
Brian J. McDonough				Street Address (P.O. Box Number is Not Acceptable)				
	seum Tower Flagler Street		-					
	FL 33130							
				City	FL Zip Code			
Tax filing r	Signature, typed or printed name of registered ago oration is eligible to satisfy its Intangi requirement and elects to do so. ria on back)	ble FILE NOV	VIII FEE K 2000 Fee w	S \$150.00 III be \$55	0.00 Trust Fund Contribution		0 May Be to Fees	
11.		ND DIRECTORS	12.	WEST PORTER	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	3 IN 11	
THLE	D	X Delete	TITLE			Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	Howard K. Wallace, 4707 N.W. 53rd Ave Gainesville, FL 3	nue, Suite A	NAME STREET CITY-S	ADDRESS	Howard K. Wallace, Jr. 4707 N.W. 53rd Avenue, Suite Gainesville, FL 32606	A		
TITLE NAME	D Edward L. Jennings	∭XDelete , Jr.	TITLE NAME		D/VP/S Edward L. Jennings, Jr.		☐ Addition	
STREET ADDRESS CITY-ST-ZIP	4707 N.W. 53rd Ave Gainesville, FL 3	nue, Suite A 2606	STREET CITY-S		4707 N.W. 53rd Avenue, Suite Gainesville, FL 32606	Α		
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME	ADDRESS	200000101	1 (5) 5)	· ·	
CITY-ST-ZIP			CITY-S		700003161: -03/07/0001 ****158.75	1970	25	
TITLE		□ Delete	TITLE		****158.75	唐林洲	S Addition	
NAME			NAME					
STREET ADDRESS				ADDRESS				
CITY-SI®ZIP			CITY-S	I - ZIP				
TITLE		L_l Delete	TITLE			Change	☐ Addition	
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			CITY-S	T-ZIP				
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME			NAME	I I I I I I I I I I I I I I I I I I I		SF)	
STREET ADDRESS CITY-ST-ZIP			CITY-S	ADDRESS T-ZIP		21		
	i e e e e e e e e e e e e e e e e e e e			1				

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:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Howard K. Wallace, Jr., President

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000099160

2/29/2000 352-377-0022

Daytime Phone #