

ANNUAL INFORMATION RETURN

Nonprofit Corporate Information

1. CORPORATE IDENTIFICATION

Corporate Registry Number

Legal Name of Nonprofit Corporation

Jurisdiction

Date of Incorporation

Reporting Fiscal Period

2. REGISTERED OFFICE ADDRESS

Street Address (Physical Location)

City / Town

Province / State

Postal / ZIP Code

Country

3. CURRENT BOARD OF DIRECTORS & OFFICERS

Full Name	Position / Office Held	Residential or Service Address	Date Appointed

4. CORPORATE ACTIVITIES & OPERATIONS

There have been changes to the corporation's primary activities or objectives during this fiscal period.

The corporation remains active and operational.

The corporation has maintained its tax-exempt or charity status, if applicable.

Number of Active Members

5. CERTIFICATION & DECLARATION

I hereby certify that I am an authorized officer or director of the corporation, that I have reviewed the information contained in this Annual Return, and that the details provided herein are true, complete, and accurate to the best of my knowledge.

Signature of Authorized Director / Officer

Title / Capacity

Date

Printed Name

Contact Telephone
