

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48835

Entity Name: CANADIAN SNOWBIRD ASSOCIATION INC.**Current Principal Place of Business:**350 GULF BLVD
INDIAN ROCKS BEACH, FL 33785**Current Mailing Address:**350 GULF BLVD
INDIAN ROCKS BEACH, FL 33785 US**FEI Number:** 59-3141653**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WEYLIE, WALLACE J
19616 GULF BLVD
402
INDIAN SHORES, FL 33785 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title 1ST VICE PRESIDENT
Name STEEVES, RONALD
Address 1095 LINCOLN ROAD
City-State-Zip: FREDERICTON E3B 8J3

Title PAST PRESIDENT
Name SLACK, ROBERT
Address 911 DAVIS LANE, RR1
City-State-Zip: ATHENS K0E 1B0

Title PRESIDENT
Name HUESTIS, KAREN
Address 57 ORCHARD WAY
City-State-Zip: WARKWORTH ONTARIO K0K 3K0

Title 2ND VICE PRESIDENT
Name MCDONALD, GARRY
Address 3168 DOUGLAS ST. RR1
City-State-Zip: CAMLACHIE ONTARIO NON 1E0

Title SECRETARY
Name CABAN, WENDY
Address 12975 PORTER DRIVE
City-State-Zip: LAKE COUNTRY BRITISH COLUMBIA
V4V 1S4

Title TREASURER
Name POPEL, TED
Address 111 BRIDLEWOOD BLVD
City-State-Zip: TORONTO ONTARIO M1T 1R3

Title DIRECTOR, ONTARIO
Name SIMPSON, CARL
Address 389 TAMARACK ST.
City-State-Zip: TIMMINS ONTARIO P4N 6R5

Title DIRECTOR, QUEBEC
Name BLAIN, JOHANNE
Address 875 RUE LE CARON
City-State-Zip: LONGUEUIL QUEBEC J4J 4S9

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: KAREN HUESTIS

PRESIDENT

01/28/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, QUEBEC
Name LEROUX, JAMES
Address 377 RUE ROSE
City-State-Zip: OTTERBURN PARK QUEBEC J3H 1M6

Title DIRECTOR WESTERN CANADA
Name LEGAULT, MIKE
Address 533 SCHUBERT PLACE NW
City-State-Zip: CALGARY ALBERTA T3L 1X3

Title DIRECTOR, CENTRAL CANADA
Name FOSTER, JOHN
Address 275 ALPINE CRESCENT
 UNIT 16
City-State-Zip: SWIFT CURRENT SASKATCHEWAN
 S9H 4Y8