

**2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000005371

**FILED**  
**Apr 01, 2019**  
**Secretary of State**  
**3390874909CC**

**Entity Name:** CANADIAN STANDARDS ASSOCIATION INC.

**Current Principal Place of Business:**

8501 EAST PLEASANT VALLEY ROAD  
CLEVELAND, OH 44131-5575

**Current Mailing Address:**

178 REXDALE BOULEVARD  
ETOBICOKE, ONT., CANADA, CN XXXXX CN

**FEI Number:** 98-0120704

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 SECRETARY  
Name YUNG, KATHRYN  
Address 178 REXDALE BLVD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name FUNG, DAVID DR.  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name HOSEIN, ROLAND DR.  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name LAVALLEY, JIMMY  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name MCCORMICK, NORMA  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name MACKINNON, DAVID  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name PAGE, BOB DR.  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name PILON, NATHALIE  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

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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:** KATHRYN YUNG

**SECRETARY**

**04/01/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GADDIS, E  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE M9W 1R3

Title DIRECTOR  
Name GRAHAM, R  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE M9W 1R3

Title DIRECTOR  
Name TILFORD, W  
Address 178 REXDALE BLVD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title CFO  
Name IMAM, FARHAN  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title DIRECTOR  
Name WHELAN, A  
Address 178 REXDALE BOULEVARD  
City-State-Zip: ETOBICOKE M9W 1R3

Title CHAIRMAN, DIRECTOR  
Name WEERES, GREG  
Address 178 REXDALE BLVD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3

Title PRESIDENT, CEO  
Name WEINSTEIN, D.  
Address 178 REXDALE BLVD  
City-State-Zip: ETOBICOKE ONTARIO M9W 1R3