

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 826222

FILED  
Aug 26, 2009  
Secretary of State

**Entity Name:** THE INDEPENDENT ORDER OF FORESTERS

**Current Principal Place of Business:**

789 DON MILLS ROAD  
TORONTO, ON M3C 1T9

**New Principal Place of Business:**

**Current Mailing Address:**

789 DON MILLS ROAD  
TORONTO, ON M3C 1T9

**New Mailing Address:**

**FEI Number:** 98-0000680      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DRIVE  
SUITE A  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: MCDONALD, J S  
Address: 789 DON MILLS ROAD  
City-St-Zip: TORONTO, ON M3C 1T9 CD

Title: P ( ) Delete  
Name: MOHACSI, GEORGE S  
Address: 789 DON MILLS ROAD  
City-St-Zip: TORONTO, ON M3C 1T9 CD

Title: ES ( ) Delete  
Name: ROUNTHWAITE, KATHARINE E  
Address: 789 DON MILLS ROAD  
City-St-Zip: TORONTO, ON M3C1T9 CD

Title: COO ( ) Delete  
Name: HAIGHT, LYNN J  
Address: 789 DON MILLS ROAD  
City-St-Zip: TORONTO, ON M3C1T9 CD

Title: D ( ) Delete  
Name: MILES, IRENE E  
Address: 3438 E. PARK AVENUE  
City-St-Zip: GILBERT, AR 85234 US

Title: IFP ( ) Delete  
Name: BLOOM, BERNARD E  
Address: 27 WILMINGTON CLOSE, TOWNHILL PARK  
City-St-Zip: HANTS, UK SO18 2RD

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: COO (X) Change ( ) Addition  
Name: GIFFEN, SHARON T  
Address: 789 DON MILLS ROAD  
City-St-Zip: TORONTO, ON M3C1T9 CD

Title: D (X) Change ( ) Addition  
Name: MORRIS, LARAIN E  
Address: 7309 W. 101 STREET  
City-St-Zip: OVERLAND PARK, KA 66212

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHARINE E. ROUNTHWAITE

ES

08/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date