2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005371

FILED Apr 26, 2007 Secretary of State

Entity Name: CANADIAN STANDARDS ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business: 8501 EAST PLEASANT VALLEY ROAD CLEVELAND, OH 441315575 **Current Mailing Address: New Mailing Address:** 8501 EAST PLEASANT VALLEY ROAD CLEVELAND, OH 441315575 FEI Number: 98-0120704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GRIFFIN, ROBERT M Name: Name: 178 REXDALE BOULEVARD Address: Address: City-St-Zip: ETOBICOKE, ONT., CANADA, City-St-Zip: Title: Title: () Delete () Change () Addition FALCONI, R J Name: Name: Address: 178 REXDALE BOULEVARD Address: City-St-Zip: ETOBICOKE, ONT., CANADA, City-St-Zip: Title: PC () Delete Title: () Change () Addition HATCH, DOUGLAS Name: Name: Address: 4 YORK RIDGE RD. Address: City-St-Zip: TORONTO, ON CANADA. M2P 1R7 CA City-St-Zip: () Delete Title: Title: () Change () Addition HILL, JULIA Name: Name: 6F CRESTLEA CIRCLE Address: Address: City-St-Zip: OTTAWA, ONTARIO, CANADA, K2G 4N2 City-St-Zip: Title: () Delete Title: () Change () Addition BRUNI, SONDRA Name: Name: 54 MEADOW RIDGE DR. Address: Address: City-St-Zip: WINNIPEG, MB R3T 5N5 City-St-Zip: Title: () Delete Title: () Change () Addition BUNN, RICHARD Name: Name: Address: 2077 FOX CREEK RD. Address: **BERWYN, PA 19312** City-St-Zip: 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: ROBERT GRIFFIN P 04/26/2007