2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002687

Entity Name: BRP US INC.

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10101 SCIENCE DR STURTEVANT, WI 53177 **Current Mailing Address: New Mailing Address:** 726 ST. JOSEPH ST. 10101 SCIENCE DR STURTEVANT, WI 53177 ATTN. MARTIN LANGELIER VALCOURT, QC J0E 2L0 CA FEI Number: 37-1341308 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BOISJOLI, JOSE PRESIDE BOISJOLI, JOSE PRES Name: Name: 726 ST JOSEPH 726 ST JOSEPH ST Address: Address: City-St-Zip: VALCOURT, QC J0E2L CA City-St-Zip: VALCOURT, QC J0E 2L0 CA Title: Title: () Delete (X) Change () Addition Name: DENAULT, DANIEL CFO Name: DENAULT, DANIEL CFO 726 ST JOSEPH 726 ST JOSEPH ST Address: Address: VALCOURT, QC J0E2L US VALCOURT, QC J0E 2L0 CA City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition LAMBERT, ROCH VP Name: Name: 10101 SCIENCE DR Address: Address: City-St-Zip: STURTEVANT, WI 53177 US City-St-Zip: () Delete Title: Title: (X) Change () Addition LANGELIER, MARTIN LANGELIER, MARTIN SECR Name: Name: Address: 726 ST JOSEPH Address: 726 ST JOSEPH ST City-St-Zip: VALCOURT, QC J0E2L CA City-St-Zip: VALCOURT, QC J0E 2L0 CA

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: MARTIN LANGELIER SECR 04/29/2009

() Delete

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STURTEVANT, WI 53177 US

CASPER, WY 82604 US

EMOND, JACQUES

HILL, MATT

4022 BEAVER

10101 SCIENCE DR

(X) Change () Addition

(X) Change () Addition

EMOND, JACQUES TREASUR

STURTEVANT, WI 53177 US

BANKSTOWN (NSW), XX 2200 AU

10101 SCIENCE DR

HILL, MATTHEW

56 CANTERBURY RD.