

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 826222

FILED
Feb 10, 2006
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
15TH FLOOR
TORONTO, ON M3C 1T9

New Mailing Address:

FEI Number: 98-0000680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: 4495 GLEN ERIN DRIVE
City-St-Zip: MISSISSAUGA, ON L5M 4G5 CD

Title: P () Delete
Name: MOHACSI, GEORGE S
Address: 138 BRENTWOOD ROAD NORTH
City-St-Zip: MISSISSAUGA, ON M8X 2C6 CD

Title: ES () Delete
Name: ROUNTHWAITE, KATHARINE E
Address: 113 KENDAL AVENUE
City-St-Zip: TORONTO, ON M5R 1L8 CD

Title: COO () Delete
Name: HAIGHT, LYNN J
Address: 197 STRATHGOWAN AVENUE
City-St-Zip: TORONTO, ON M4N 1C4 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 CD

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
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Address:
City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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

02/10/2006

Electronic Signature of Signing Officer or Director

Date