

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 826222

FILED
May 11, 2007
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 ()**
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:

CHIEF FINANCIAL OFFICER
P.O. BOX 6200 32314-6200
200 E.GAINES ST.
TALLAHASSEE, FL 32399 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
Name:
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 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

05/11/2007

Electronic Signature of Signing Officer or Director

_____ Date