



NOTICE TO CHANGE OFFICE

CREDIT UNION INCORPORATION ACT, section 39.41

Telephone: 1 877 526-1526 www.bcreg.ca

Mailing Address: PO Box 9431 Stn Prov Govt Victoria BC V8W 9V3

Courier Address: 200 - 940 Blanshard Street Victoria BC V8W 3E6

INSTRUCTIONS:

- 1. Please type or print clearly in block letters and ensure that the form is signed and dated in ink. Complete all areas of the form. The Registry may have to return documents that do not meet this standard.
2. In Box A, enter the exact name as shown on the Certificate of Incorporation, Amalgamation, Continuation or Change of Name.
3. In Box C and E, enter the address currently registered at the Corporate Registry.
4. In Box D and F, enter the new physical address. You may include general delivery, post office box, rural route, site or comp. number as part of the address, but the Registry cannot accept this information as a complete address. You must also include a postal code. If an area does not have street names or numbers, provide a description that would readily allow a person to locate the office.
NOTE: A credit union may locate a registered office and a records office at the same place.
5. If the registered or records office address is that of the solicitor or agent for the credit union and the solicitor or agent move their place of business, the solicitor or agent must file a new Notice to Change Office with the filing fee. The Notice to Change Office must clearly indicate that it is filed under section 39.41(4) of the Credit Union Incorporation Act.
6. Please provide the Registry with two copies of this form. Section 39.41(3) of the Credit Union Incorporation Act requires the registrar to send a copy of this form to the previous registered or records office except for a notice filed under section 39.41(4).
7. Filing Fee: \$20.00. Submit this form with a cheque or money order made payable to the Minister of Finance, or provide the Registry authorization to debit the fee from your BC OnLine Deposit Account.

B CERTIFICATE OF INCORPORATION NO.

OFFICE USE ONLY - DO NOT WRITE IN THIS AREA

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information requested on this form is collected, used and disclosed under the authority of the FOIPPA and the Credit Union Incorporation Act for the purposes of assessment. Questions regarding the collection, use and disclosure of personal information can be directed to the Manager of Registries Operations at 1 877 526-1526, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

A FULL NAME OF CREDIT UNION

REGISTERED OFFICE ADDRESS CHANGE

C FROM - Previous Address

Province BC Postal Code

D TO - New Address

Province BC Postal Code

RECORDS OFFICE ADDRESS CHANGE

E FROM - Previous Address

Province BC Postal Code

F TO - New Address

Province BC Postal Code

G CERTIFIED CORRECT - I have read this form and found it to be correct.

Signature of a current Director, Officer, or Credit Union Solicitor

Date Signed YYYY MM DD

X