



Extrajvincial Non-Share Corporation
LIMITED REINSTATEMENT EXTENSION APPLICATION
SOCIETIES ACT, section 186

Telephone: 1 877 526-1526
www.gov.bc.ca/societies

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

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

Filing Fee: \$15.00

Please complete and submit this form to BC Registries and Online Services for filing with payment by cheque or money order made payable to the Minister of Finance, or provide the registry with authorization to debit the fee from your BC OnLine Deposit Account. Please pay in Canadian dollars or in the equivalent amount of US funds.

Freedom of Information and Protection of Privacy Act (FOIPPA): Personal information provided on this form is collected, used and disclosed under the authority of the FOIPPA and the Societies 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

INSTRUCTIONS: Please review our webpage www.gov.bc.ca/Societies for information on making a Limited Reinstatement Extension Application.

An Applicant who has submitted a Limited Reinstatement Application may make an application within that limited period to the registrar to extend the period to a later date.

A NAME OF EXTRAJVINCIAL NON-SHARE CORPORATION AT TIME OF CANCELLATION REGISTRATION NUMBER IN BC

B APPLICANT NAME AND MAILING ADDRESS

The applicant name, email address and mailing address are required. Only 1 applicant is required.

Applicant - the Extrajvincial Non-Share Corporation or a person who at the time of cancellation was a member of the board of directors of the Extrajvincial Non-Share Corporation or a member of another governing body.

CORPORATION/SOCIETY NAME INCORPORATION/REGISTRATION NUMBER
FIRST NAME MIDDLE NAME LAST NAME
EMAIL
MAILING ADDRESS CITY PROV/STATE COUNTRY POSTAL CODE/ZIP CODE

C DELIVERY METHOD - Choose one delivery method for the applicant to receive a copy of the Certificate.

Applicant Email

By Mail to Applicant Mailing Address

Pickup (Victoria only) Contact Person

Telephone

D APPLICANT RELATIONSHIP TO SOCIETY - Check Applicable Box:

I am related to the extrajvincial non-share corporation that is to be reinstated and at the time the Extrajvincial Non-Share Corporation was dissolved I was:

The Extrajvincial Non-Share Corporation.

A member of the board of directors or other governing body.

E HEAD OFFICE ADDRESSES

DELIVERY ADDRESS - (PO Box number alone is not acceptable. Postal Code required.) CITY Prov. POSTAL CODE
MAILING ADDRESS- (If different from delivery address.) CITY Prov. POSTAL CODE

PRIMARY EMAIL ADDRESS ALTERNATE EMAIL ADDRESS

F ATTORNEY(S) - (If any.)
COMPANY OR SOCIETY NAME

FIRST NAME	MIDDLE NAME	LAST NAME	
DELIVERY ADDRESS - (PO Box number alone is not acceptable. Postal Code required.)		CITY	Prov. POSTAL CODE
			BC
MAILING ADDRESS- (If different from delivery address.)		CITY	Prov. POSTAL CODE
			BC
COMPANY OR SOCIETY NAME			

FIRST NAME	MIDDLE NAME	LAST NAME	
DELIVERY ADDRESS - (PO Box number alone is not acceptable. Postal Code required.)		CITY	Prov. POSTAL CODE
			BC
MAILING ADDRESS- (If different from delivery address.)		CITY	Prov. POSTAL CODE
			BC

G EXTEND LIMITED REINSTATEMENT PERIOD - Complete this Item if reinstatement is to be approved by the registrar.

The expiration of the extension of the limited period of reinstatement will be two years from the date this application is filed unless otherwise specified below:

Less than 6 months, number of months:

6 months from the date the Extraprovincial Non-Share Corporation's Extend Limited Reinstatement application is filed.

12 months from the date the Extraprovincial Non-Share Corporation's Extend Limited Reinstatement application is filed.

18 months from the date the Extraprovincial Non-Share Corporation's Extend Limited Reinstatement application is filed.

H CERTIFICATION - I certify that I have relevant knowledge of the society, and that I am authorized to make this filing.

Note: It is an offence to make a false or misleading statement in respect of a material fact in a record submitted to the Corporate Registry for filing. See section 223 of the Societies Act.

NAME	SIGNATURE	DATE SIGNED (YYYY MM DD)
	X	

I DELIVERY METHOD - Choose one delivery method for the Extraprovincial Non-Share Corporation's certified documents.

Society Email	Other Email Address	
Pickup (Victoria only)	Contact Person	Telephone
By Mail to Registered Office Mailing Address		