

REMOTE SERVICE REQUEST FORM

REQUESTERS INFORMATION

LAST NAME		FIRST NAME	
ADDRESS			
CITY		PROV/STATE	POSTAL / ZIP
PHONE	FAX	E-MAIL ADDRESS	
PAYMENT TYPE (CIRCLE) VISA / M/C / CHEQUE / MO <small>MAIL IN SERVICE ONLY</small>		CREDIT CARD INFORMATION (IF APPLICABLE)	
DELIVERY METHOD (CHECK OFF PREFERENCE) <input type="checkbox"/> REGULAR MAIL/COURIER (ADDITIONAL FEE - CIRCLE) <input type="checkbox"/> E-MAIL (IF POSSIBLE) (NO ADDITIONAL FEE) <input type="checkbox"/> FAX (NO ADDITIONAL FEE) <input type="checkbox"/> LONG DISTANCE FAX (ADDITIONAL FEE)		CREDIT CARD NUMBER	
		ISSUED TO	
		EXPIRY DATE (MM/YY)	CVV (SECURITY CODE)
APPLICANT'S SIGNATURE (REQUIRED)		CREDIT CARD HOLDER'S SIGNATURE (REQUIRED IF APPLICABLE) I AUTHORIZE WEST-END / CALLINGWOOD REGISTRIES TO USE MY CREDIT CARD FOR THE SERVICES REQUESTED	

Notice Of Change Of Address Of Director(s)

Business Corporations Act
Section 108(1.1)

1. Name of Corporation

Alberta 2. Corporate Access Number

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3. Address Change for Director(s) (for additional directors, please attach a list)

Name of Director (Last, First, Second)
New Mailing Address (including postal code)
Effective Date:
Resident Canadian? (To be completed only by Alberta Corporations) <input type="checkbox"/> Yes <input type="checkbox"/> No

Name of Director (Last, First, Second)
New Mailing Address (including postal code)
Effective Date:
Resident Canadian? (To be completed only by Alberta Corporations) <input type="checkbox"/> Yes <input type="checkbox"/> No

Name of Director (Last, First, Second)
New Mailing Address (including postal code)
Effective Date:
Resident Canadian? (To be completed only by Alberta Corporations) <input type="checkbox"/> Yes <input type="checkbox"/> No

Name of Director (Last, First, Second)
New Mailing Address (including postal code)
Effective Date:
Resident Canadian? (To be completed only by Alberta Corporations) <input type="checkbox"/> Yes <input type="checkbox"/> No

4. To be completed only by Alberta Corporations:

Are at least half of the members of the Board of Directors resident Canadians? Yes No

Name of Person Authorizing (please print)

Telephone Number (daytime)

Date

Identification

Title (please print)

This information is being collected for the purposes of corporate registry records in accordance with the Business Corporations Act. Questions about the collection of this information can be directed to the Freedom of Information and Protection of Privacy Coordinator for Alberta Registries, Research and Program Support, 3rd Floor, Commerce Place, 10155 - 102 Street, Edmonton, Alberta T5J 4L4, (780) 422-7330.

Notice Of Change Of Address Of Director(s)

BUSINESS CORPORATIONS ACT

INSTRUCTIONS

This form is to be used only to change the address of existing directors. It cannot be used to add new directors or delete existing directors. If you wish to add or delete director(s), please complete the Notice of Directors or Notice of Change of Directors form.

Information filed with the Registrar pursuant to the Business Corporations Act must conform to Section 1 of the Regulations made under this Act.

Item 1. Enter the corporation's full legal name in Alberta.

Item 2. Enter the Alberta Corporate Access Number of this corporation. It is printed on the top right-hand corner of the:

- Certificate of Incorporation
- Certificate of Continuance
- Certificate of Amalgamation
- Certificate of Registration.

Item 3. Enter the following information:

- complete name (last, first, second)
- complete mailing address INCLUDING the postal code
- effective date of this address change.

If more than four directors are changing their address, please attach a list for additional directors in duplicate.

Item 4. For Alberta corporations only. The Business Corporations Act requires at least half of the directors of an Alberta corporation to be resident Canadians. Check the appropriate box.

The following information must be included:

- name of person authorizing (director/authorizing officer)
- title
- identification
- date
- daytime telephone number

When the information is submitted to your service provider, identification of the authorized person/officer/director/declarant will be required.