Ministry of Finance
Corporate and Personal
Property Registries

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

Location:
2nd Floor – 940 Blanshard Street
Victoria BC

Enquiries: 250 356-8673
Office Hours: 8:30 – 4:30 (Monday – Friday)

COOPERATIVE
LIST OF FIRST DIRECTORS

Cooperative Association Act
Section 14(a)

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. Attach an additional sheet if more space is required.**
2. One director must be ordinarily resident in British Columbia.
3. The address must be a complete 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.
4. Additional information and forms are available on the internet at: www.fin.gov.bc.ca/registries

OFFICE USE ONLY – DO NOT WRITE IN THIS AREA

Freedom of Information and Protection of Privacy Act (FIPPA)
The personal information requested on this form is made available to the public under the authority of the *Cooperative Association Act*. Questions about how the *FIPPA* applies to this personal information can be directed to the Administrative Analyst, Corporate and Personal Property Registries at 250 356-0944, PO Box 9431 Stn Prov Govt, Victoria BC V8W 9V3.

FULL NAME OF ASSOCIATION (Enter the exact name as shown on the memorandum)

DIRECTORS – List full names and addresses of all directors

LAST NAME	FIRST NAME & INITIALS *(IF ANY)*	RESIDENTIAL ADDRESS *(INCLUDE POSTAL / ZIP CODE)*

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

Signature of a current Director, Officer, or Lawyer of the Association	Relationship to Association	DATE SIGNED YYYY MM DD
X		

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