

This information is collected in accordance with the *Business Corporations Act and Regulation*. It is required to confirm the corporation's ongoing existence and ownership. Collection is authorized under s. 33(a) of the *Freedom of Information and Protection of Privacy Act*. Questions about the collection can be directed to Service Alberta Contact Centre staff at cr@gov.ab.ca or 780-427-7013 (toll-free 310-0000 within Alberta).

1. Name of Corporation

2. Corporate Access Number

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3. Date of Incorporation, Amalgamation, Continuance, or Registration in Alberta

_____ *yyyy-mm-dd*

4. Annual return for the year ending

_____ *yyyy*

5. Amended Annual Return (if applicable)

This annual return amends the report previously filed for the year ending _____ *yyyy*

6. Corporation Address

Street or Physical Location	City/Town	Province	Postal Code

There has been a change to the corporation's address or attorney information. It has not previously been reported to Corporate Registry. A Notice of Change of Address or Change of Attorney/Attorney Address is attached to this form.

7. Notice of Change of Directors

There has been a change to the corporation's directors. It has not previously been reported to Corporate Registry. A Notice of Change of Directors is attached to this form.

8. Current Shareholders: (check all options that apply)

- There are no shareholder changes since last reported.
- The name of a current shareholder(s) has changed since last reported.
- The address of a current shareholder has changed since last reported.
- There has been a change of one or more shareholders since last reported.

The current shareholders, for the year ending _____ *yyyy*, are listed below.

Name

Last Name/Corporation Name	First Name	Middle Name

New Name (if applicable)

Last Name/Corporation Name	First Name	Middle Name

Address

Street/Postal Address			
City/Town	Province	Postal Code	Corporate Access Number <i>(if applicable)</i>

Percentage of Issued Voting Shares

_____ %

Name

Last Name/Corporation Name	First Name	Middle Name
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New Name *(if applicable)*

Last Name/Corporation Name	First Name	Middle Name
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Address

Street/Postal Address			
City/Town	Province	Postal Code	Corporate Access Number <i>(if applicable)</i>

Percentage of Issued Voting Shares

_____ %

Name

Last Name/Corporation Name	First Name	Middle Name
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New Name *(if applicable)*

Last Name/Corporation Name	First Name	Middle Name
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Address

Street/Postal Address			
City/Town	Province	Postal Code	Corporate Access Number <i>(if applicable)</i>

Percentage of Issued Voting Shares

_____ %

9. Authorized Representative/Authorized Signing Authority for the Corporation

_____ Last Name, First Name, Middle Name *(optional)*

_____ Relationship to Corporation

_____ Telephone Number *(optional)*

_____ Email Address *(optional)*

_____ Date of submission *(yyyy-mm-dd)*

_____ Signature