

**1 Name of Condominium Corporation**

**2 Condominium Corporation Number (as it appears on the certificate)**

**3 Address of Registered Office (include mailing address if different)**

|                        |                    |             |
|------------------------|--------------------|-------------|
| Number and Street Name |                    |             |
| City                   | Province/Territory | Postal Code |

**4 Effective Date of Change**

**5 Previous Address of Registered Office**

|                        |                    |             |
|------------------------|--------------------|-------------|
| Number and Street Name |                    |             |
| City                   | Province/Territory | Postal Code |

**6 Declaration**

|  |                  |
|--|------------------|
| I hereby certify that I have the relevant knowledge of the condominium corporation, and that I am authorized to sign and submit this form. |                  |
| Signature (Must be a director, officer or a solicitor of the company)  | Date             |
| Print name   | Telephone Number |



## INSTRUCTIONS

The filing fee for this form is \$10.00. Your cheque can be made payable to Newfoundland Exchequer Account.

This form is required to be signed by a **current** director, officer or solicitor for the company.

The *Condominium Act, 2009* requires a notice of registered office to be filed with the Registry each time there is a change.

## GENERAL

If you require more information please do not hesitate to contact the registry office at 709-729-3317.

## **PRIVACY NOTICE**

*The Registry of Condominiums, under the authority of the Condominium Act 2009, collects personal information for the purpose of incorporating condominium corporations and registering changes to the Registered Office as is required in Section 17(3) of the Act. If you have questions or comments, please contact the Registrar at (709) 729-3317.*