**Notice of Registered Office**

(name of condominium corporation)

**Condominium Corporation Number**

(as it appears on the certificate)

**Address of Registered Office**

(include mailing address if different)

<table>
<thead>
<tr>
<th>Number and Street Name</th>
<th>City</th>
<th>Province/Territory</th>
<th>Postal Code</th>
</tr>
</thead>
</table>

**Effective Date of Change**

**Previous Address of Registered Office**

<table>
<thead>
<tr>
<th>Number and Street Name</th>
<th>City</th>
<th>Province/Territory</th>
<th>Postal Code</th>
</tr>
</thead>
</table>

**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, office or a solicitor of the company)  
Date

Print name  
Telephone Number

Registry of Condominiums, P.O. Box 8700, 59 Elizabeth Avenue, St. John’s, NL, A1B 4J6  
Telephone: (709)729-3317  
General information and forms: www.gs.gov.nl.ca/cr  
Online services available at: cado.eservices.gov.nl.ca
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.