



\*300322392\*

The Corporations Act  
2017 ANNUAL RETURN OF INFORMATION

Manitoba 

1. BUSINESS NUMBER 852221803MC0001	2. JURISDICTION MANITOBA	3. DATE OF INCORPORATION OR AMALGAMATION 26-Jul-2010	4. LAST ANNUAL RETURN FILED 2016
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5. CORPORATION NAME & MAILING ADDRESS (MAKE CHANGES IF NECESSARY IN THE SPACE PROVIDED)  
NATURIST LEGACY INC.  
  
  
6107681

ANNUAL RETURN NOTIFICATIONS BY E-MAIL  
☒ YES, PLEASE SEND FUTURE ANNUAL RETURN NOTIFICATIONS TO THE EMAIL ADDRESS BELOW:

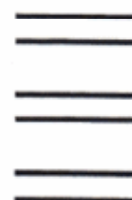
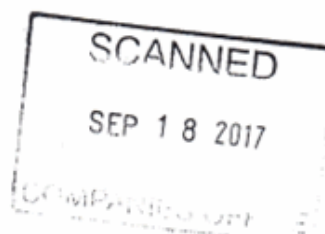
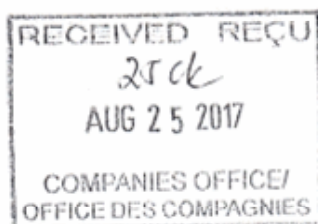
**SECTION A - Complete all sections**

1. MAIN TYPE OF BUSINESS (MAKE CHANGES IF NECESSARY)  
NONPROFIT ORGANIZATION

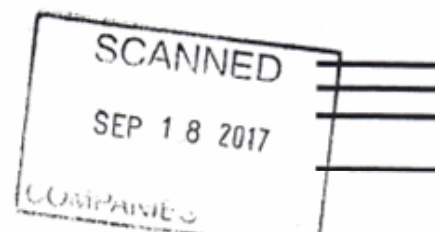
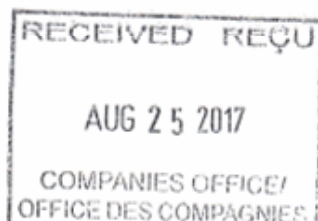
2. REGISTERED OFFICE ADDRESS  
IF THE ADDRESS HAS CHANGED, PROVIDE THE NEW ADDRESS TOGETHER WITH THE DATE OF CHANGE  
  
Day / Month / Year

3. DIRECTORS  
CURRENT DIRECTOR(S) ON RECORD -

FULL NAME	RESIDENCE ADDRESS (PROVIDE MOST CURRENT RESIDENCE ADDRESS)	COMPLETE, IF APPLICABLE
/ STERLING, BRIAN		<input type="checkbox"/> CEASED AS A DIRECTOR Day / Month / Year
/ BINKLEY, JACK		<input type="checkbox"/> CEASED AS A DIRECTOR Day / Month / Year
/ BLATTA, JIM PRESIDENT		<input type="checkbox"/> CEASED AS A DIRECTOR Day / Month / Year
/ LEDUC, JOHN SECRETARY		<input type="checkbox"/> CEASED AS A DIRECTOR Day / Month / Year



PERRY, YVETTE		<input type="checkbox"/> CEASED AS A DIRECTOR Day / Month / Year
TREASURER		
NEW DIRECTOR(S), IF APPLICABLE - If insufficient space, attach a list with the required information		
FULL NAME	RESIDENCE ADDRESS (PROVIDE MOST CURRENT RESIDENCE ADDRESS)	COMPLETE, IF APPLICABLE
		<input type="checkbox"/> APPOINTED AS A DIRECTOR Day / Month / Year
		<input type="checkbox"/> APPOINTED AS A DIRECTOR Day / Month / Year
		<input type="checkbox"/> APPOINTED AS A DIRECTOR Day / Month / Year
4. OFFICERS		
CURRENT OFFICER(S) ON RECORD -		
FULL NAME	RESIDENCE ADDRESS (PROVIDE MOST CURRENT RESIDENCE ADDRESS)	POSITION HELD (i.e.: President, Secretary, etc)
LYON, DEBORAH		PAST - PRESIDENT
<input checked="" type="checkbox"/> CEASED TO BE AN OFFICER		
BROWN, MARK		TREASURER
<input checked="" type="checkbox"/> CEASED TO BE AN OFFICER		
PERRY, YVETTE		SECRETARY
<input type="checkbox"/> CEASED TO BE AN OFFICER		TREASURER.
(SELECT THIS BOX IF THERE ARE NO OFFICERS) <input type="checkbox"/> NO OFFICERS APPOINTED AT THIS TIME		
NEW OFFICER(S), IF APPLICABLE - If insufficient space, attach a list with the required information		
FULL NAME	RESIDENCE ADDRESS (PROVIDE MOST CURRENT RESIDENCE ADDRESS)	POSITION HELD (i.e.: President, Secretary, etc)
Jim Blatta		PRESIDENT
John Leduc		SECRETARY
SECTION B		



**FULL NAME AND ADDRESS OF INDIVIDUAL APPOINTED AS THE ATTORNEY FOR SERVICE IN MANITOBA**

(Only the Address of the Attorney for Service (if appointed) can be changed on this form)

**SECTION C - Complete all sections**

I YVETTE PERRY, being a/an OFFICER of the  
(Print Name) (Director, Officer, Agent)

corporation, certify that the information is correct as of the last day of the corporation's anniversary month in the year for which this annual return is filed. I have the authority to sign this document on behalf of the corporation.

Date: Aug 23 / 17

Signature: [Redacted] (sign here)

Phone (Day): [Redacted]

**ANNUAL RETURN DUE DATE:** 31-Aug-2017

**FILING FEE:** \$25.00

**FILING OPTIONS:**

**Online Filing** - Go to the web site at [www.companiesoffice.gov.mb.ca/index.html](http://www.companiesoffice.gov.mb.ca/index.html) and click on Companies Online link.

**Paper Filing** - Send the completed, signed (in ink) form with a cheque (payable to the **Minister of Finance**) or payment option form to the Companies Office, 1010-405 Broadway, Winnipeg, MB R3C 3L6. This form will be rejected if all required sections are not completed. Please make a copy for your records.

MG-3220 (REV. 03/16)

Available in French, upon request

