



**4. Officers of the Association:**

<u>NAME/POSITION</u>	<u>RESIDENCE</u>
_____	_____
_____	_____
_____	_____
_____	_____

**5. Original/Additional Members:**

<u>NAME</u>	<u>RESIDENCE</u>
_____	_____
_____	_____
_____	_____

*\* Please see attached list of members:*

Certified Correct:

\_\_\_\_\_  
Corporate Secretary

SUBSCRIBED AND SWORN to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, affiant exhibiting to me his/her Community Tax Certificate No. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_.

**NOTARY PUBLIC**

Doc. No. : \_\_\_\_\_  
Page No. : \_\_\_\_\_  
Book No. : \_\_\_\_\_  
Series of : \_\_\_\_\_