



Notification of a change to corporation officers' details

Name of corporation	Bawinanga Aboriginal Corporation
Indigenous Corporation Number (ICN)	29

New contact person's/secretary's details *(if applicable)*

Former contact person's/secretary's details	Title	Mr		
	First name	Andrew	Middle name	
	Last name	Langshaw		
	Date this person stopped being the contact person/secretary			
				26 December

New contact person's/secretary's details	Contact person for a small or medium corporation	Secretary of a large corporation X
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contact person/secretary 1	Title	Mr			
	First name	Gerry	Middle name	John	
	Last name	Mier			
	Previous name(s) <i>(if any)</i>				
Residential address				13/15 Lake Street	
CAIRNS QLD				Postcode	4870
Date this change took effect				26 December	

Changes to current contact person's/secretary's details *(if applicable)*

Ceased directors details *(if applicable)*

New directors' details *(if applicable)*

Changes to current directors' details *(if applicable)*

Declaration

I declare the information provided on this form is correct.

Full name

Date

Gerry Mier