



Notification of a change to corporation officers' details

Name of corporation

Indigenous Corporation Number (ICN)

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

New contact person's/secretary's details Contact person for a small or medium corporation Secretary of a large corporation X

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)*

Director 1 Title
First name Middle name
Last name

Previous name(s) *(if any)*

Residential address

 Postcode

This director will hold office for: Up to 1 year Up to 2 years X

Date of appointment

This person is a: Director X

Alternate director >Terms of the alternate director's appointment

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Director 2

Title	Mr		
First name	Julius	Middle name	Don
Last name	Kernan		

Previous name(s) (if any)

Residential address

Postcode

This director will hold office for: Up to 1 year Up to 2 years

Date of appointment

This person is a: Director X

Alternate director Terms of the alternate director's appointment

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Declaration

I declare the information provided on this form is correct.

Full name	Date
<input type="text" value="Wayne Kalakala"/>	<input type="text" value="30 July 2021"/>