



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)*

Director 1
Title
First name Middle name
Last name

Date this person stopped being a director of the corporation

This person was a: Director X Alternate director

New and reappointed 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 23 November 2023

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 James Middle name

Last name Woods

Previous name(s) (if any)

Residential address Lot 783

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Maningrida NT Postcode 0822

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

Date of appointment 23 November 2023

This person is a: Director X

Alternate director > Terms of the alternate director's appointment

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Director 3

Title Mr

First name Julius Middle name Don

Last name Kernan

Previous name(s) (if any) Clint ,

Residential address Lot 350

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MANINGRIDA NT Postcode 0822

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

Date of appointment 23 November 2023

This person is a: Director X

Alternate director > Terms of the alternate director's appointment

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Director 4

Title Mr

First name Matthew Middle name

Last name Ryan

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

Alternate director [Terms of the alternate director's appointment](#)

Director 5

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

Date of appointment

This person is a: Director

Alternate director [Terms of the alternate director's appointment](#)

Changes to current directors' details (if applicable)

Declaration

I declare the information provided on this form is correct.

Full name

Date