



# Notification of a change to corporation officers' details

**Name of corporation**

**Indigenous Corporation Number (ICN)**

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

**Former contact person's/secretary's details**

Title

First name  Middle name

Last name

Date this person stopped being the contact person/secretary

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

**contact person/secretary 1**

Title

First name  Middle name

Last name

Previous name(s) *(if any)*

Residential address

Postcode

Date this change took effect

## 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

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**Director 2**

Title			
First name	Lenore	Middle name	
Last name	Mills		

Date this person stopped being a director of the corporation      26 March 2014

This person was a:      Director X      Alternate director

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**Director 3**

Title	Mr		
First name	Loddy	Middle name	
Last name	Chippendale		

Date this person stopped being a director of the corporation      26 March 2014

This person was a:      Director X      Alternate director

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**Director 4**

Title	Mr		
First name	Nicholas	Middle name	
Last name	Macumboy		

Date this person stopped being a director of the corporation      26 March 2014

This person was a:      Director X      Alternate director

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**Director 5**

Title	Mr		
First name	Ray	Middle name	Douglas
Last name	Wallis		

Date this person stopped being a director of the corporation      26 March 2014

This person was a:      Director X      Alternate director

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**Director 6**

Title	Mrs		
First name	Yohan (Yodie)	Middle name	Wilma
Last name	Batzke		

Date this person stopped being a director of the corporation      26 March 2014

This person was a:      Director X      Alternate director

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## New directors' details *(if applicable)*

### Director 1

Title			
First name	Deanne	Middle name	
Last name	Macumboy		
Previous name(s) <i>(if any)</i>			
Residential address	200 Bottomline Hill Road		
	LOCKHARTQLD	Postcod	4871

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

Date of appointment 26 March 2014

This person is a:                      Director X

Alternate director      > Terms of the alternate director's appointment

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### Director 2

Title			
First name	James	Middle name	
Last name	Adams		
Previous name(s) <i>(if any)</i>			
Residential address	49 Alstonia Drive		
	WEIPAQLD	Postcod	4874

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

Date of appointment 26 March 2014

This person is a:                      Director X

Alternate director      > Terms of the alternate director's appointment

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### Director 3

Title			
First name	John	Middle name	Davis
Last name	Chippendale		
Previous name(s) <i>(if any)</i>			
Residential address	3B Woosup Street		

UMAGICOQLD	Postcod	4876
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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 4**

Title

First name  Middle name

Last name

Previous name(s) (if any)

Residential address

Postcod

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 5**

Title

First name  Middle name

Last name

Previous name(s) (if any)

Residential address

Postcod

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 6**

Title

First name	Phillip	Middle name	
Last name	Wallis		

Previous name(s) (if any)

Residential address

C/- Umagico Council	
14 Young Street	
UMAGICOQLD	Postcod 4876

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

### Declaration

*I declare the information provided on this form is correct.*

Full name

Date