



# 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)*

**Director 1** 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

Date of appointment

This person is a:  Director X

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

**Director 2** Title

First name	Churchill	Middle name	
Last name	Jones		

Previous name(s) (if any)

Residential address   
  
 Postcod

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

**Director 3**

Title	Mr	Middle name	
First name	Daryl	Middle name	
Last name	Smith		

Previous name(s) (if any)

Residential address   
  
 Postcod

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

**Director 4**

Title	Mr	Middle name	
First name	Frank (Francis)	Middle name	
Last name	Perriman		

Previous name(s) (if any)

Residential address   
  
 Postcod

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

**Director 5**

Title Mr

First name Holloway Middle name

Last name Smirke

Previous name(s) (if any)

Residential address 1/17-23 Calliance Way

BAYNTONWA Postcod 6714

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

Date of appointment 21 February 2020

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

Grant Bussell

25 February 2020