



# 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 X medium corporation       Secretary of a large corporation

## 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](#)

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

### Declaration

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

Full name

Date

Aileen Addo