



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	Ms	
First name	Nicole	Middle name Helen
Last name	Turner	

Date this person stopped being a director of the corporation

This person was a: Director X Alternate director

Director 2

Title	Ms	
First name	Wendy	Middle name
Last name	Cowan	

Date this person stopped being a director of the corporation

This person was a: Director X Alternate director

New directors' details *(if applicable)*

Director 1 Title

First name	Donald	Middle name	
Last name	Griffen		

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

Director 2

Title	Mr	Middle name	
First name	Kevin	Middle name	
Last name	Jarrett		

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

Changes to current directors' details (if applicable)

Director 1

Title	Mrs	Middle name	
First name	Karen	Middle name	
Last name	Kennedy		

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

Director 2

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 X

Alternate director >Terms of the alternate director's appointment

Director 3

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 X

Alternate director >Terms of the alternate director's appointment

Director 4

Title

First name Middle name

Last name

Previous name(s) (if any)

Residential address	2 Robert Gardem Place		
	KEMPSEY NSW	Postcode	2440

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

Declaration

I declare the information provided on this form is correct.

Full name

Date