



# 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	<input type="text" value="Mr"/>	
First name	<input type="text" value="Nick"/>	Middle name <input type="text" value="Maurice"/>
Last name	<input type="text" value="Brisbout"/>	

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	<input type="text" value="Miss"/>	
First name	<input type="text" value="Ebony"/>	Middle name <input type="text" value="Kaye"/>
Last name	<input type="text" value="Humble"/>	

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	<input type="text" value="Mr"/>	
First name	<input type="text" value="Joseph"/>	Middle name <input type="text"/>
Last name	<input type="text" value="West"/>	

Date this person stopped being a director of the corporation

This person was a:      Director X      Alternate director

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## 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

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### Director 2

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

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### Director 3

Title   
First name  Middle name   
Last name

Previous name(s) (if any)

Residential address

Via

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

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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