



# Notification of a change to corporation officers' details

Name of corporation

Durri Aboriginal Corporation Medical Service

Indigenous Corporation Number  
(ICN)

27

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

New contact person's/  
secretary's detailsContact 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	Middle name	
First name	Alison		
Last name	Martin		

Date this person stopped being a director of the corporation 27 November 2019

This person was a: Director X Alternate director

Director 2

Title	Mr	Middle name	
First name	Allan		
Last name	Lockwood		

Date this person stopped being a director of the corporation 27 November 2019

This person was a: Director X Alternate director

Director 3

Title	Mrs	Middle name	Edna
First name	Kerry		
Last name	Wade		

Date this person stopped being a director of the corporation 27 November 2019

This person was a:      Director X      Alternate director

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

### Director 1

Title			
First name	Arthur	Middle name	Frederick
Last name	Kelly		

Previous name(s) *(if any)*

Residential address   
  

SOUTH KEMPSEYNSW	Postcod	2440
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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

### Director 2

Title			
First name	Cheryl	Middle name	
Last name	Davis		

Previous name(s) *(if any)*

Residential address   
  

KEMPSEYNSW	Postcod	2440
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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

### Director 3

Title			
First name	Mary-Lou	Middle name	
Last name	Buck		

Previous name(s) *(if any)*

Residential address	13 Erington Avenue		
	WEST KEMPSEYNSW	Postcod	2440

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

Date of appointment

This person is a:                      Director ☒

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