



# 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 X

Date of appointment

This person is a: ☒ Director X

☐ Alternate director ☒ Terms of the alternate director's appointment

Director 2 Title

First name	Katherine	Middle name	
Last name	Holten		

Previous name(s) (if any)

Residential address	23/9 Jack Williams Crescent		
	KEMPSEYNSW	Postcod	2440

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	Mr	
First name	Sean	Middle name Harold
Last name	Phillips	

Previous name(s) (if any)

Residential address	57 Bloomfield Street		
	SOUTH KEMPSEYNSW	Postcod	2440

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	Ms	
First name	Wendy	Middle name
Last name	Cowan	

Previous name(s) (if any)

Residential address	14 Angus Mcneil Crescent		
	KEMPSEY NSW	Postcode	2440

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

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**Declaration**

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

Full name

Date