



# 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)*

**Director 1**

Title	<input type="text" value="Mr"/>	Middle name	<input type="text"/>
First name	<input type="text" value="Colin"/>		
Last name	<input type="text" value="Gibson"/>		

Date this person stopped being a director of the corporation

This person was a:       Director X       Alternate director

**Director 2**

Title	<input type="text" value="Mr"/>	Middle name	<input type="text"/>
First name	<input type="text" value="John John"/>		
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

**Director 3**

Title	<input type="text"/>	Middle name	<input type="text"/>
First name	<input type="text" value="Lance"/>		
Last name	<input type="text" value="Turner"/>		

Date this person stopped being a director of the corporation

This person was a:          Director X          Alternate director

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**Director 4**

Title			
First name	Robert	Middle name	
Last name	Nanala		

Date this person stopped being a director of the corporation

This person was a:          Director X          Alternate director

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**Director 5**

Title			
First name	Tarna	Middle name	
Last name	Andrews		

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	Caroline	Middle name	
Last name	Ward		

Previous name(s) *(if any)*

Residential address	Kiwirrkura Community		
	Gibson Desert NorthVia		
	ALICE SPRINGSNT	Postcod	0871

This director will hold office for:          Up to 1 year X          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	Mr		
First name	Johnny	Middle name	
Last name	Gordon		

Previous name(s) *(if any)*

Residential address	Mulan Community
HALLS CREEKWA	Postcod 6770

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

**Director 3**

Title

First name                       Middle name

Last name

Previous name(s) (if any)

Residential address	Papunya Community
PAPUNYANT	Postcod 0872

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

**Director 4**

Title

First name                       Middle name

Last name

Previous name(s) (if any)

Residential address	Kiwirrkurra Community
	Gibson Desert Northvia
Alice SpringsNT	Postcod 0872

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

**Director 5**

Title	Ms	
First name	Maisie	Middle name
Last name	Gibson	

Previous name(s) (if any)

Residential address	Unit 5		
	1 Percy Court		
	KILGARIFFNT	Postcod	0873

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)****Director 1**

Title	Mr	
First name	Bobby	Middle name
Last name	West Tjupurrula	

Previous name(s) (if any)

Residential address	Kiwirrkurra Community		
	<input type="text"/>		
	KIWIRRKURRA WA	Postcode	0872

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	<input type="text"/>	
First name	Linda	Middle name
Last name	James	

Previous name(s) (if any)

Residential address	Kiwirrkurra Community		
	<input type="text"/>		
	KIWIRRKURRA WA	Postcode	0872

This director will hold office for:      Up to 1 year X                      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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**Declaration**

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

Full name

Date