

## Notification of a change to corporation officers' details

Name of corporation	Old Mapoon Aboriginal Corporation					
<b>Indigenous Corporation Number</b> (ICN)	7792					
New contact person's/se	ecretary's deta	ils <i>(if appli</i>	icable)			
New contact person's/ secretary's details		n for a small or um corporation	X Se	ecretary of a la	arge corporation	
Changes to current cont	act person's/s	ecretary's	details	(if applic	able)	
Ceased directors details (if applicable)						
New directors' details (if applicable)						
Changes to current directors' details (if applicable)						
Director 1 Title First name Last name	Cameron		Middle name W	/allace		
Previous name(s) (if any)  Residential address	Lot 186 Wheeler Stre	eet				
	Red Beach MAPOON QLD			Postcode	4874	
This director will hold office for:	Up to 1 year	Up to	2 years X			
Date of appointment	10 September 2021					
This person is a:	Director X Alternate director	>Terms of the	alternate o	director's appo	pintment	

Declaration	I declare the information provided	I declare the information provided on this form is correct.			
	Full name	Date			
	Pauline Smith	29 November 2021			