



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="Ms"/>	
First name	<input type="text" value="Tania"/>	Middle name <input type="text"/>
Last name	<input type="text" value="Casey"/>	

Date this person stopped being a director of the corporation

This person was a: Director X Alternate director

New directors' details *(if applicable)*

Director 1

Title	<input type="text"/>	
First name	<input type="text" value="David"/>	Middle name <input type="text"/>
Last name	<input type="text" value="Hudson"/>	

Previous name(s) *(if any)*

Residential address

<input type="text" value="EDGE HILLQLD"/>	Postcod	<input type="text" value="4870"/>
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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 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 3

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 4

Title

First name Middle name

Last name

Previous name(s) (if any)

Residential address	PO Box 30		
	KURANDAQLD	Postcod	4881

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)*

Declaration

I declare the information provided on this form is correct.

Full name

Date