Austral	ian S	ecuritie	es &
Investn	nents	Comm	ission

Form 484

Corporations Act 2001

Change to company details

Sections A, B or C may be lodged independently with this signed cover page to notify ASIC of:

- A1 Change of address
- A2 Change of name officeholders and proprietary company members
- A3 Change ultimate holding company
- B1 Cease company officeholder
- B2 Appoint company officeholder
- B3 Special purpose company

- C1 Cancellation of shares
- C2 Issue of shares
- C3 Change to share structure
- C4 Changes to the register of members for proprietary companies

Company details	Company name			
	WINDAR HOLDINGS LIMITED			
Refer to guide for information about	ACN/ABN Corporate key			
corporate key	003 035 523			
Lodgement details	Who should ASIC contact if there is a query about this form?			
	Firm/organisation			
	Contact name/position description			
	ASIC registered agent number (if applicable)			
	Acto registered agent number (ii applicable)			
	Telephone number			
	Postal address or DX address			
	Total number of pages including this cover sheet			
Signature This form must be signed by a current of	ificeholder of the company.			
	I certify that the information in this cover sheet and the attached sections of this form are true and complete.			
	GORDON B. ELKINGTON			
	Capacity Director			
	Company secretary			
	Signature			
	Curdon Elkington			
	Date signed O			
	[D D] [M M] [Y 'Y]			

Lodgement

Send completed and signed forms to:

Australian Securities and Investments Commission,

PO Box 4000, Gippsland Mail Centre VIC 3841.

Or lodge the form electronically by visiting the ASIC website

www.asic.gov.au

For help or more information

Telephone 1300 300 630

Email

info.enquiries@asic.gov.au

Web

www.asic.gov.au

B2 Appoint company off	iceholder			
Use this section to notify appointment of a company officeholder. You need to notify details separately for each new officeholder.				
Role of appointed officeholder Select one or more boxes	✓ Director Secretary			
	Alternate director			
Date of appointment	Date of appointment [] [D D] [M M] [Y Y]			
Name	The name of the appointed officeholder is (provide full given names, not initials) Family name Given names ALFRED EDWARD FULTON Date of birth Given names			
Former name Eg change by deed poll or marriage	Their previous name was (provide full given names, not initials) Family name Given names			
Residential address	The residential address of the appointed officeholder is			
	Street number and Street name 29 BUCKINGHAM ROAD Suburb/City State/Territory NEW SOUTH WALES Postcode Country (if not Australia)			
If an 'Alternate director', for whom Note: Where an Alternate director is appointed, please attach the terms of appointment to this change form. (Refer to the guide for annexure requirements)	The appointed 'Alternate director' is alternate for (person alternate for) Family name Given names Expiry date (if applicable) [D D] [M M] [Y Y] Alternate director terms of appointment attached			