

ASIC

Australian Securities & Investments Commission



# Change to company details

Form 484 — Corporations Act 2001

# Section B

Section B may be lodged independently if no changes are to be notified via Sections A or C.

Use this form to notify ASIC of:

**B1** Appoint company officeholder

B2 Cease company officeholder

B3 Change to special purpose company status

484 A - change of address, name (officeholders or members), details (ultimate holding company) 484 C - issue/cancel shares, change share structure and members' register

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

## Company details

### Company name

AUSTRALIAN UNITED RETAILERS LIMITED

#### ACN/ ABN

077 879 782

Continues on next page...

B1 Appoint company office	holder	
Use this section to notify appointment of a co	ompany 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 0 9 / 0 9 / 0 9 [D D] [M M] [Y Y]	
Name	The name of the appointed officeholder is (Provide full given names, not initials)  Family name  Given names  FAIRTHORNE  Place of birth (town/city)  READING, UNITED KINGDOM  Date of Birth  2 4 / 0 3 / 5 2  [D D] [M M] [Y Y]	
Former name (eg change by deed poll, 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  56 THE AVENUE  Suburb/City  NEDLANDS  Postcode  Country (if not Australia)  6009	
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  Expiry date (If applicable)  [D D] [M M] [Y Y]  Has the role been extended? (Select one box)  Yes  No	

Signature		
This form must be signed by a current office	eholder of the company.	
	I certify that the information in this form is true and complete  Name	1
A resigning officeholder's signature is not acceptable.	Capacity Director  Company secretary	
	Signature	
	Date signed  1 0 1 0 9 1 0 9  [D D] [M M] [Y Y]	
Lodging party details		
Please notify the registered agent details	(if applicable) and to whom queries about this form should be directed.	
Please notify the registered agent details  Registered Agent details  If this form is being lodged by an ASIC	(if applicable) and to whom queries about this form should be directed.  ASIC registered agent name	
Please notify the registered agent details		
Please notify the registered agent details  Registered Agent details  If this form is being lodged by an ASIC registered agent, please complete agent	ASIC registered agent name	

ASIC registered agent above

Name of lodging party

AUSTRALIAN UNITED RETAILERS LIMITED

Office, unit, level, or PO Box number

Level 1

Street number and Street name

1601 MALVERN ROAD

Suburb/City

GLEN IRIS

Postcode

Country (if not Australia)

DX Number DX City/suburb

Telephone Number
0408 354 284



Mail

Send completed and signed forms to: Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841. For help or more information

Telephone 03 5177 3988

Email <u>info.enquiries@asic.gov.au</u>
Web <u>www.asic.gov.au/easylodge</u>