



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 | B1 Cease company officeholder | C1 Cancellation of shares |
| A2 Change of name – officeholders and proprietary company members | B2 Appoint company officeholder | C2 Issue of shares |
| A3 Change – ultimate holding company | B3 Special purpose company | C3 Change to share structure |
| | | C4 Changes to the register of members for proprietary companies |

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

Refer to guide for information about corporate key

Company name

AUSTRALIAN UNITED RETAILERS LIMITED

ACN/ABN

077 879 782

Corporate key

Lodgement details

An image of this form will be available as part of the public register.

Who should ASIC contact if there is a query about this form?

ASIC registered agent number (if applicable)

Firm/organisation

AUSTRALIAN UNITED RETAILERS LIMITED

Contact name/position description

KEN SLEEP

Telephone number (during business hours)

(04) 08 354 284

Email address (optional)

kensleep@foodworks.com.au

Postal address

LEVEL1, 1601 MALVERN ROAD

Suburb/City

GLEN IRIS

State/Territory

VIC

Postcode

3146

Signature

This form must be signed by a current officeholder of the company.

I certify that the information in this cover sheet and the attached sections of this form are true and complete.

Name

KEN SLEEP

Capacity

☐ Director

☒ Company secretary

Signature

Date signed

0 4 / 0 8 / 1 0
[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

B1 Cease company officeholder

Use this section to notify if a company officeholder has ceased to be a company officeholder. You need to notify details separately for each ceased officeholder.

Role of ceased officeholder

Select one or more boxes

- ☒ Director
☐ Secretary
☐ Alternate director ——— Person alternate for

Date officeholder ceased

Date of change

0	4	/	0	8	/	1	0
[D]	[D]		[M]	[M]		[Y]	[Y]

Name

The name of the ceased officeholder is

Family name

Given names

Date of birth

2	9	/	0	5	/	5	2
[D]	[D]		[M]	[M]		[Y]	[Y]

Place of birth (town/city)

(state/country)

B1 Continued... Cease another company officeholder

Use this section to notify if a company officeholder has ceased to be a company officeholder. You need to notify details separately for each ceased officeholder.

Role of ceased officeholder

Select one or more boxes

- ☐ Director
☐ Secretary
☐ Alternate director ——— Person alternate for

Date officeholder ceased

Date of change

		/			/		
[D]	[D]		[M]	[M]		[Y]	[Y]

Name

The name of the ceased officeholder is

Family name

Given names

Date of birth

		/			/		
[D]	[D]		[M]	[M]		[Y]	[Y]

Place of birth (town/city)

(state/country)