Mailed 15 May 2013

**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
The state of the s	North Ryde Community Finance Limited
Refer to guide for information about corporate key	ACN/ABN Corporate key
	11 068 149 178
Lodgement details	Who should ASIC contact if there is a query about this form?
	Firm/organisation  North Ryde Community Finance Limited
	Contact name/position description  Dr Graham McMaster - Director
	ASIC registered agent number (if applicable)
	Telephone number 02 98053253
	Postal address or DX address  Shop 14, 203-213 Cox's Road
	North Ryde NSW 2113
Signature	Total number of pages including this cover sheet  2
This form must be signed by a current of	
	I certify that the information in this cover sheet and the attached sections of this form are true and complete.  Name
	Graham McMaster
	Capacity  ** Director
	Company secretary
	Graham f. heh as ter.
	Date signed  1 5 ,0 5 ,1 3 [D D] [M M] [Y Y]
adaamant	Sand completed and signed forms to:

.odgement

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 office	ceholder	
Use this section to notify if a company officeholder.	officeholder has ceased to be a company c	officeholder. You need to notify details separately for each ceased
Role of ceased officeholder Select one or more boxes	Director  Secretary	
	Alternate director — Person altern	ate for
Date officeholder ceased	Date of change  1 7 /0 4 /1 3  [D D] [M M] [Y Y]	
Name	The name of the ceased officeholder is	
	Family name Walker	Given names Phillip Matthew
	Date of birth  0 4 / 0 1 / 7 3  [D D] [M M] [Y Y]	THE THE CHEW
	Place of birth (town/city)	(state/country)
	Penrith	NSW
	nother company officeholde officeholder has ceased to be a company of	fficeholder. You need to notify details separately for each ceased
Role of ceased officeholder Select one or more boxes	Director Secretary Alternate director —— Person alternate	ate 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)