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Notification by officeholder of resignation

Form 370 Corporations Act 2001 205A

Company details	Company name				
Company actans	GOSNELLS FINANCIAL SERVICE LIMITED				
	ACN				
	11 095 764 533				
Lodgement details	Who should ASIC contact if there is a que	ry about this for	m?		
Lougement details	ASIC registered agent number (if applicable)				
An image of this form will be available as					
part of the public register.	Firm/organisation				
8	Contact name/position description		Telephone number (during	business hours)	
	RAYMOND SMITH		(08) 94590	72	
	Email address (optional)				
	smith vay @ bigfond	'. Com · ai	L		
	Postal address				
	17 REGAL DRIVE				
	Suburb/City	Sta	te/Territory	Postcode	
	THORNLIE		WA	6108	
				- Andrewski - Andr	
be in accordance with the letter of resignation to the company.	Office held (tick all roles from which the officeholder is ceasing) Director Secretary Alternate director				
	Family name	Given names			
*	SMITH	RAYMON			
	Place of birth (town/city)		(state/country)		
	PERTH		WA		
	Date of cessation Date of birth				
	03,10,14		05,12,6	+ 5	
	[D D] [M M] [Y Y]		[D D] [M M] [\	′ Y]	
Signature	I certify that the information in this form is true a	and complete and	that the attached documer	t marked () is a true	
This form must be signed by the resigning					
or retiring officeholder.	Name				
	RAYMOND SMITT	4			
	Signature				
	OR) . H				
	Kamira				
	Date signed				
		1 10 6			
	05,10,14			tter endorsed as an annexure	
		Copy of to this f		tter endorsed as an annexure	
Lodgement	05,10,14				

Need help? www.asic.gov.au/question

Telephone 1300 300 630