C1 Cancellation of shares

## ASIC Australian Securities & Investments Commission

A1 Change of address

## Change to company details

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

Date signed 15/08/2018 [D D] [M M] [YY]

B1 Cease company officeholder

A2 Change of name - officeholders or member A3 Change - ultimate holding company	ers B2 Appoint company officehol B3 Special purpose company	C3 Change	shares to share structure s to the register of members	
If there is insufficient space in any section of this lodgment	of the form, you may photocopy t	he relevant page(s) a	nd submit as part	
Company details	Company name			
Company details	MOOROOLBARK & DISTRICT FINANCIAL SERVICES LIMITED			
Ā	ACN/ABN Corporate key		Corporate key	
	098 234 354			
	Is this a response to	the Annual Statemen	t? Print Y for yes or N for no.	
Lodging details	ging details Who should ASIC contact if there is a query about this form?			
	lame	- · · · · · · · · · · · · · · · · · · ·		
L	JOAN L DREW & ASSOC	IATES		
_	ASIC registered agent number (if applicable)			
	12 602			
_	elephone number			
L	03 9726 4044			
Postal address				
Ĺ	PO Box 360			
	MOOROOLBARK VIC 313	38		
T ti	otal number of pages including his cover page	Plea take	se provide an estimate of the time n to complete this form	
			hrs mins	
Signature This form must be signed by a current officeho	older of the company.			
XI	certify that the information in this fo	rm is true and complet	e	
· . — .	Name			
	DREW	JOAN	LESLEY	
	Capacity			
	X Director			
	Company secretary			
	Alternate director			
<u> </u>	Signature			

## Form 484 - Change of client's details for MOOROOLBARK & DISTRICT FINANCIAL SERVICES LIMITED

B1 Cease company of Use this section to notify if a company off for each ceased officeholder.		mpany officeholder. You need to notify details separately
Role of ceased officeholder (Select one or more boxes)	Director  X Secretary  Alternate director	Person alternate for
Date officeholder ceased	Date of change  15/08/2018  [D D] [M M] [YY]	
Name	The name of the appointed Family name  DREW  Date of Birth  23/02/1955  [D D] [M M] [YY]	ed officeholder is (Provide full given names, not initials)  Given names  JOAN LESLEY
	Place of birth (town/city) LILYDALE	(state/country) VIC

ASIC Form 484 Trace: 10295

B2 Appoint company or Use this section to notify appointment of a company or Description of the Company of the	officeholder company officeholder. You need to notify details	s separately for each new officeholder.		
Role of appointed officeholder (Select one or more boxes)	Director  X Secretary			
_	Alternate director			
Date of appointment	Date of appointment  15/08/2018  [D D] [M M] [YY]			
Name	The name of the appointed officeholder is (Provide full given names, not initia			
	Family name	Given names		
	NICHOLAS	RICHARD KIM		
	Date of Birth			
	[DD] [M M] [YY]	·		
	Place of birth (town/city)	(state/country)		
	YORKSHIRE	UNITED KINGDOM		
Former name	Their previous name was (Provide full given names, not initials)  Family name  Given names			
(eg change by deed poll, marriage.)				
Residential address	The residential address of the appointed officeholder is			
	Street number and Street name			
	23 ERITH LANE			
	Suburb/City	State/Territory		
	KALORAMA	VIC		
	Postcode Country (if not Australia)			
	3766			
If an 'Alternate director', for whom	The name of the appointed officeholder i	s (Provide full given names, not initials)		
Note: Where an Alternate director is	Family name	Given names		
appointed, please attach the terms of appointment to this change form.				
(Refer to the guide for annexure requirements)	Expiry date (if applicable)			
• •	[D D] [M M] [YY]			
_	Alternate director terms of appointm	nent attached		