

**Australian Securities &  
Investments Commission**

**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

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

COBDEN & DISTRICTS COMMUNITY FINANCE LTD

ACN/ABN

117781049/84117781049

Corporate key

21739451

## Lodgement details

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

Firm/organisation

MRS. MARGARET McDONALD

Contact name/position description

ASIC registered agent number (if applicable)

Telephone number

03 55951058

Postal address or DX address

35 CEMETERY ROAD

COBDEN. 3266

Total number of pages including this cover sheet

2

## 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

MRS MARGARET McDONALD

Capacity

☒ Director

☐ Company secretary

Signature

M. McDonald

Date signed

22/11/07  
[D] [M] [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](http://www.asic.gov.au)

### For help or more information

Telephone 1300 300 630  
Email [info.enquiries@asic.gov.au](mailto:info.enquiries@asic.gov.au)  
Web [www.asic.gov.au](http://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. A company does not have to notify ASIC that an officeholder has ceased if the officeholder has already notified ASIC by lodging a Form 370 *Notification by officeholder of resignation or retirement*.

**Role of ceased officeholder**  
Select one or more boxes

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

**Date officeholder ceased**

Date of change  
2 / 1 / 07  
[D] [M] [Y]

**Name**

**The name of the ceased officeholder is**

Family name

MCDONALD

Given names

MARGARET EMILY

Date of birth

03 / 10 / 49  
[D] [M] [Y]

Place of birth (town/city)

WARRNAMBOOL

(state/country)

VICTORIA / AUSTRALIA

## 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. A company does not have to notify ASIC that an officeholder has ceased if the officeholder has already notified ASIC by lodging a Form 370 *Notification by officeholder of resignation or retirement*.

**Role of ceased officeholder**  
Select one or more boxes

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

**Date officeholder ceased**

Date of change  
[D] [M] [Y]

**Name**

**The name of the ceased officeholder is**

Family name

Given names

Date of birth

[D] [M] [Y]

Place of birth (town/city)

(state/country)

## B2 Appoint company officeholder

Use this section to notify appointment of a company 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 of appointment  
 21/11/07  
 [D][D][M][M][Y][Y]

**Name**

The name of the appointed officeholder is (provide full given names, not initials)

Family name

Given names

KELSON

GAYLE PATRICIA

Date of birth

19/08/53  
 [D][D][M][M][Y][Y]

Place of birth (town/city)

(state/country)

Melbourne

AUSTRALIA

**Former name**

Eg change by deed poll or marriage

Their previous name was (provide full given names, not initials)

Family name

Given names

KELSON (MURFIT)  
 ARE

GAYLE PATRICIA

**Residential address**

The residential address of the appointed officeholder is

Street number and Street name

47 MITCHELL STREET

Suburb/City

State/Territory

COBDEN

VICTORIA

Postcode

Country (if not Australia)

3266

**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

Given names

Expiry date (if applicable)

☐ ☐ / ☐ ☐ / ☐ ☐  
 [D][D][M][M][Y][Y]

☐ Alternate director terms of appointment attached