P002

Australian Securities & **Investments Commission**

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Form 484

Change to co	mpany details		Corporations Act 2001			
	pendently with this signed cover page to					
A1 Change of address A2 Change of name - officeholders and proprie company members A3 Change - ultimate holding company	B1 Cease company officeholder tary B2 Appoint company officeholder B3 Special purpose company	C1 Cancellation of sha C2 Issue of shares C3 Change to share st C4 Changes to the reg	tructure jister of members for proprietary			
	ion of the form, you may photocopy the re	elevant page(s) and submit as part of this lo	dgement			
Company details Refer to guide for information about corporate key	Company name COBDEN & DISTRICTS OF ACN/ABN 117 781 049 Corporate key 104 506 13	COMMUNITY FINANCE L	IMITED			
Lodgement details	Who should ASIC contact if there is a	Juery about this form?				
An image of this form will be available as part of the public register.	ASIC registered agent number (if applicat Firm/organisation	DISTRICTS COMMUNITY F				
	MARGARET MCDONALD SECRETARY (03)55951058 Email address (optional) margaret emily @ Yahoo.com.au					
	Postal address 35 CEMETERY ROAD					
	Suburb/City COBDEN	State/Territory VIC	Postcode 3266			
Signature This form must be signed by a current office						
	Capacity Capacity Company secretary Signature Date signed D D D M M Y Y Y D D D D D D D D D D D D	neet and the attached sections of this form are t	true and complete.			
Lodgement	end completed and signed forms to:	For more information				

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

Web www.asic.gov.au

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

Telephone 1300 300 630

B1 Cease company o	fficeholder					
	any officeholder has ceased to be a company officeholder. You need to notify details separately for each cea	sed				
Role of ceased officeholder Select one or more boxes	Director Secretary					
	Alternate director ———— Person alternate for					
Date officeholder ceased	Date of change Date of change Date of change					
Name	The name of the ceased officeholder is Family name GARDNER Date of birth O 4/0 2/5 3 D D M M Y Y					
	Place of birth (town/city) (state/country) COLAC. VIC					
B1 Continued Cease	another company officeholder	<u> </u>				
	any officeholder has ceased to be a company officeholder. You need to notify details separately for each cease	ied				
Role of ceased officeholder Select one or more boxes	Director Secretary Alternate director —— Person alternate for					
Date officeholder ceased	Date of change					
	$[D \overline{D}] \overline{[M \overline{M}] [Y \overline{Y}]}$					