Australian	Securities &
Investmen	ts 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	Company name ETTALONG BEACH FINANCIAL SERVICES LIMITED					
Refer to guide for information about corporate key	ACN / ABN Corporate key 110 069 120					
Lodgement details	Who should ASIC contact if there is a query about this form?					
	Firm/organisation KELLY PARTNERS (CENTRAL COAST) PTY LTD Contact name/position description SCOTT ELWIN					
	ASIC registered agent number (if applicable) 24972					
	Telephone number 02 4367 6630					
	Postal address or DX address PO BOX 3616					
	ERINA NSW 2250					
Signature This form must be signed by a current offic	ceholder of the company I certify that the information in this cover sheet and the attached sections of this for Name	rm are true and complete.				
	DEBRA DENISE WALES					
	Capacity X Director Company secretary Signature Date signed					
	25 / 08 / 2010 [D D] [M M] [Y Y Y Y]					

Lodgement

Send completed and signed forms to: Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841. For help or more information Telephone 1300 300 630

Email <u>info.enquiries@asic.gov.au</u>
Web <u>www.asic.gov.au</u>

ASIC Form 484

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8 October 2008

Cover page

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. Role of ceased offi ceholder X Director Select one or more boxes Secretary Alternate director Person alternate for Date officeholder ceased Date of change 25 / 08 / 2010 [D D] [M M] [Y Y Y Y] The name of the ceased officeholder is Name Family name Given names DONALD ERNEST LEGGETT Date of birth 13 / 04 / 1928 [D D] [M M] [Y Y Y Y]

(state/country) NSW

Place of birth (town/city)

SYDNEY

ASIC Form 484

8 October 2008

Section B Page 1 of 4

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 X Director (Select one or more boxes) Secretary Alternate director Date of appointment Date of appointment 04 / 02 / 2010 [D D] [M M] [Y Y Y Y] Name The name of the appointed officeholder is (provide full given names, not initials) Family name Given names ADAM SIBERY CROUCH Date of birth 16 / 05 / 1972 [D D] [M M] [Y Y Y Y] Place of birth (town/city) (state/country) **ADELAIDE** Former name Their previous name was (Provide full given names, not initials) Eg change by deed poll or marriage Family name Given names Residential address The residential address of the appointed officeholder is Office, unit, level Street number and Street name 25 THE PALISADE Suburb/City State/Territory UMINA BEACH NSW Postcode Country (if not Australia) 2257 If an 'Alternate director', for whom The appointed 'Alternate director' is alternate for (person alternate for) Note: Family name Given names Where an Alternate director is appointed, please attach the terms Expiry date (If applicable) of appointment to this change form. (Refer to the guide for annexure [D D] [M M] [Y Y Y Y] requirements) Alternate director terms of appointment attached

ASIC Form 484

Document trace number:

1008969

8 October 2008

Section B Page 2 of 4

B2 Appoint company officeholder Use this section to notify appointment of a company officeholder. You need to notify details separately for each new officeholder. Director Role of appointed officeholder (Select one or more boxes) Secretary Alternate director Date of appointment Date of appointment 04/02/2010 [D D] [M M] [Y Y Y Y] The name of the appointed officeholder is (provide full given names, not initials) Name Given names ROBERT HENRY MILLWOOD Date of birth 18 / 03 / 1948 [D D] [M M] [Y Y Y Y] Place of birth (town/city) (state/country) NSW SYDNEY Their previous name was (Provide full given names, not initials) Former name Eg change by deed poll or marriage Given names Family name The residential address of the appointed officeholder is Residential address Office, unit, level Street number and Street name 292 BURGE ROAD State/Territory Suburb/City WOY WOY NSW Country (if not Australia) Postcode 2256

If an 'Alternate director', for whom

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)

Given names

Family name Expiry date (If applicable) [D D] [M M] [Y Y Y Y] Alternate director terms of appointment attached

ASIC Form 484

8 October 2008

Section B Page 3 of 4

1008969

B2 Appoint company officeholder

Use this section to notify appointment of a company officeholder. You need to notify details separately for each new officeholder. Director Role of appointed officeholder (Select one or more boxes) Secretary Alternate director Date of appointment Date of appointment 04 / 02 / 2010 [DD] [MM] [YYYY] Name The name of the appointed officeholder is (provide full given names, not initials) Family name Given names THOMAS PAUL DAVID Date of birth 02 / 09 / 1953 [D D] [M M] [Y Y Y Y] Place of birth (town/city) (state/country) GOSFORD NSW Former name Their previous name was (Provide full given names, not initials) Eg change by deed poll or marriage Family name Given names Residential address The residential address of the appointed officeholder is Office, unit, level Street number and Street name 151 BRICK WHARF ROAD Suburb/City State/Territory WOY WOY NSW Postcode Country (if not Australia) 2256 If an 'Alternate director', for whom The appointed 'Alternate director' is alternate for (person alternate for) Family name Note: Given names Where an Alternate director is appointed, please attach the terms Expiry date (If applicable) of appointment to this change form. (Refer to the guide for annexure [D D] [M M] [Y Y Y Y] requirements) Alternate director terms of appointment attached