

## 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 or 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

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

FLEURIEU COMMUNITY ENTERPRISES LTD

ACN/ABN

116 550 157

Corporate key

### Lodgement details

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

Name

GEORGE APAR

ASIC registered agent number (if applicable)

Telephone number

08-85578646

Postal address

37 ESPLANADE PORT WILLUNGA.  
SOUTH AUSTRALIA

Total number of pages including this cover sheet

1

Please provide an estimate of the time taken to complete this form.

- hrs 3 mins

### 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

GEORGE APAR

Capacity

☒ Director CHAIRMAN

☐ Company secretary

Signature

G. Apar

Date signed

22/12/06  
[D] [D] [M] [M] [Y] [Y]

### Lodgement

Send completed and signed forms to:  
Australian Securities and Investments Commission,  
PO Box 4000, Glippsland 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 03 5177 3988  
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.

Role of ceased officeholder  
Select one or more boxes

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

Date officeholder ceased

Date of change

3 0 1 0 0 6  
[D] [D] [M] [M] [Y] [Y]

Name

The name of the ceased officeholder is

Family name

EVANS

Given names

JASON

Date of birth

1 6 0 1 7 3  
[D] [D] [M] [M] [Y] [Y]

Place of birth (town/city)

ADELAIDE

(state/country)

SOUTH 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.

Role of ceased officeholder  
Select one or more boxes

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

Date officeholder ceased

Date of change

/ /  
[D] [D] [M] [M] [Y] [Y]

Name

The name of the ceased officeholder is

Family name

Given names

Date of birth

/ /  
[D] [D] [M] [M] [Y] [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

23/11/06  
[D] [M] [Y]

### Name

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

Family name

SUTER

Given names

KAREN MIRANDA

Date of birth

09/04/53  
[D] [M] [Y]

Place of birth (town/city)

ADELAIDE

(state/country)

SOUTH AUSTRALIA

### Former name

Eg change by deed poll or marriage

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

Family name

Given names

### Residential address

The residential address of the appointed officeholder is

Street number and Street name

52 CROSER AVE

Suburb/City

ALDINGA BEACH

State/Territory

SOUTH AUSTRALIA

Postcode

5173

Country (if not Australia)

### 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] [M] [Y]

☐ Alternate director terms of appointment attached