Australian Securities & Investments Commission

OFFICE USE ONLY: 1F

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 or proprietary company members
- A3 Change ultimate holding company

All mandatory fields will be identified with an *.

- 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

| Company details | Company name * Gosnells Financial Services | | | | | | | | | |
|---|---|--|--|--|--|---|--|--|--|--|
| Refer to guide for information about corporate key | | | | | | | | | | |
| | ACN/ABN * | Corporate key * | | | | | | | | |
| | 11 095 764 533 | 22395406 | | | | | | | | |
| Lodgement details | Who should ASIC contact if there is a query about this form? Firm/organisation | | | | | | | | | |
| | | | | | | Gosnells Financial Services Limited Contact name/position description Tanya Poynter | | | | |
| | ASIC registered agent number (if applicable) | | | | | | | | | |
| | Telephone number | | | | | | | | | |
| | | 0892997451 | | | | | | | | |
| | | Postal or DX address | | | | | | | | |
| | | PO Box 417 | | | | | | | | |
| Gosnells WA 6990 | | | | | | | | | | |
| Total number of pages including this cover sheet 3 | | | | | | | | | | |
| Signature This form must be signed by a current off | ceholder of the company. | The state of the s | | | | | | | | |
| | I certify that the information in this cover sheet Name * | t and the attached sections of this form are true and complet | | | | | | | | |
| | Tanya Poynter | | | | | | | | | |
| | Capacity * | | | | | | | | | |
| This form must be | Director | | | | | | | | | |
| SICNED | Company secretary | | | | | | | | | |
| SIGNED and | Signature | | | | | | | | | |
| DATED by a current | → | | | | | | | | | |
| officeholder after it is | Dete signed | | | | | | | | | |
| | Date signed | (dd/mm/yyyy) | | | | | | | | |
| PRINTED | {current date/time} | | | | | | | | | |

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

For help or more information

Telephone 1300 300 630 Email <u>Click here to send ASIC an email</u>

Web www.asic.gov.au

Change Notification Page

| Please notify the changes you wish to make by selecting generate the appropriate section(s) which will appear aft | g at least one of the tick boxes available below. Your tickbox selections will ter this page. |
|---|--|
| A1 Change of address A2 Change a name for officeholder or proprietary comp A3 Change of ultimate holding company details B1 Cease an officeholder B2 Appoint an officeholder B3 Change to special purpose company status | Click on the button below if you need assistance in making your selection Form 484 Guide Once you have made all your selections, scroll down to complete the required sections |
| To notify ASIC of changes to the shares and/or member Please wait until the table displays showing the ap | • |
| C 🔲 Issue of shares | |
| C Cancellation of shares | |
| C Transfer of shares | |
| C Changes to amounts paid | |
| C Changes to beneficial ownership | |

| Use this section to notify if a company officeholder. A company does not have Notification by officeholder of resignation | to notify ASIC that an officeholder ha | • | • | • | |
|---|--|--------------|-----------------|---|--|
| Role of ceased officeholder Select one or more boxes | Director | | | | |
| | Secretary | | | | |
| | Alternate director | | | | |
| Date officeholder ceased | Date of change * 13/06/2007 | (dd/mm/yyyy) | | | |
| Name | The name of the ceased officeholder is | | | | |
| | Family name * | | Given names * | | |
| | Watson | | Graeme | | |
| | Date of birth * | | | | |
| | 21/01/1947 | (dd/mm/yyyy) | | • | |
| | Place of birth (town/city) | | (state/country) | | |
| | Narrogin | | WA | | |