Australian Securities & **Investments Commission**

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Form 484

IA CIMITED

Corporations Act 2001

Change to company details

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- 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 a	ny section of the form, you may phot	ocopy the relevant page(s)	and submit as part of	this lodgement
Company details	Сотралу пате			
	COMMOUNITY	FINANCIAL	5ERVICES	VICTOR

Refer to guide for information about corporate key

756 351 0

Corporate key 758142

Lodgement details	who should ASIC contact if there is a query about this form
•	Name

ACN/ABN

TANIA HANSEN

ASIC registered agent number (if applicable)

Telephone number

59975

Postal address

WESTERNPORT ROAD LANG LANG 3984

Total number of pages including this cover sheet

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

O I hrs mins

Signature

This form must be signed by a current officeholder of the company.

Leartify that the information in this cover sheet and the attached sections of this form are true and complete.

Name

HANSEN

Capacity

Director

Company secretary

Date signed

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 03 5177 3988

Email info.enquiries@asic.gov.au

Web www.asic.gov.au

ASIC Form 484

26 February 2004

Cover page

B2 Appoint company of	ficeholder
	company officeholder. You need to notify details separately for each new officeholder.
Role of appointed officeholder Select one or more boxes	✓ Director Secretary
Date of appointment	Date of appointment Date of I I I I I I I I I I I I I I I I I I
Name	The name of the appointed officeholder is (provide full given names, not initials) Family name Given names LESLIE TO HA Date of birth Dignary May (Y Y)
	Place of birth (town/city) (state/country) MCRNINGTON VICTORIA AUSTRALIA
Former name Eg change by deed poli 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 I SO I JEST ROAD Suburb/City State/Territory LANGWARRON SOUTH Postcode 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 D] [M M] [Y Y] Alternate director terms of appointment attached