

## Investments Commission

NBR

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

Refer to guide for information about corporate key

Company name

COMMUNITY FINANCIAL SERVICES VICTORIA LIMITED

ABN/ABN

51 092 756 351

Corporate key 87349850

27581423

## Lodgement details

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

Firm/organisation

COMMUNITY FINANCIAL SERVICES VICTORIA LIMITED

Contact name/position description

TANIA HANSEN

ASIC registered agent number (if applicable)

Telephone number

03 59975019

IPC

19 NOV 2008

Postal address or DX address

29 WESTERNPORT RD

AJ

LANG LANG

Total number of pages including this cover sheet

2

## 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

TANIA HANSEN

Capacity

☐ Director☒ Company secretary

Signature

T Hansen

Date signed

18/11/08  
(D) (D) (M) (M) (Y) (Y)

## 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

## For help or more information

Telephone 1300 300 630  
Email [info.enquiries@asic.gov.au](mailto:info.enquiries@asic.gov.au)  
Web [www.asic.gov.au](http://www.asic.gov.au)

**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  
3 0 / 1 0 / 0 8  
[D] [D] [M] [M] [Y] [Y]

**Name**

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

Family name

DE JONG

Given names

MEINT PETER

Date of birth

2 1 / 1 2 / 4 6  
[D] [D] [M] [M] [Y] [Y]

Place of birth (town/city)

THE HAGUE

(state/country)

THE NETHERLANDS

**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

22 DIXON ROAD

Suburb/City

CARDINIA

State/Territory

VICTORIA

Postcode

3978

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