Australian Securities &

Investments 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

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- C3 Change to share structure
- C4 Changes to the register of members for proprietary companies

f there is insufficient space in any se	ection of the form, you may photocopy the relevant page(s) and submit as part of this lodgement
Company details	Company pame
Company details	TOODYAY & DISTRICTS LOMMUNITY HMANUAL SPRVICES LTD
Refer to guide for information about	Corporate key
comporate key	67 090 105 249 21604448
	Who should ASIC contact if there is a query about this form?
Lodgement details	FirmVorganisation
	Contact name/position description
	VICKI WESLEY - COMPANY SECLETARY
	ASIC registered agent number (if applicable)
	ASIC registered again number (ii approximy)
	T-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
	Telephone number 08 9574 4948
	Postal address or DX address
	108 \$ STIRLING THE, TODDYAY 6566
	Total number of pages including this cover sheet
	3
Signature This form must be signed by a current	t 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 Capacity Director Company secretary Signstrue Date signed D
	Send completed and signed forms to: For help or more information
Lodgement	Australian Securities and Investments Commission. Telephone 1300 300 630
	PO Box 4000, Gippsland Meil Centre VIC 3841. Email info enquiries@asic.gov.au
	Web www.asic.gov.au
	Or lodge the form electronically by visiting the ASIC website
ASIC Form 484	www.as/c.gov.at/ Cover page 6 September 2007
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B1 Cease company office	holder				and the series details assessible for	each reased
Use this section to notify if a company officeholder. A company does not have to Notification by officeholder of resignation	DOUBLY WORK IN	eased to be a t an officehol	company officed or has cease	ceholder. d if the of	You need to notify details separately for inceholder has already notified ASIC by I	odging a Form 370
Role of ceased officeholder	Director					
Select one or more boxes	Secretary					
	Alternate di	rector ——	Person alternat	e for		
Date officeholder ceased	Date of change		Ž Y			
- Name	The name of th	ceased offic	eholder is	Ob		
Name	Family name			Given na	LIAM JOHN FRANCIS	
	Date of birth					
		III / S I	O Y			
	Place of birth (to			(state/co	untry) TRAUA	
_	NED.	111		700	COTOCAT	
	44		Foobolde	· ·		
B1 Continued Cease and	other com	pany on		Ficeholdo	· You need to notify details separately f	or each ceased
Use this section to notify if a company of officeholder. A company does not have to Notification by officeholder of resignation	to notity ASIC ti	ceased to be lat an officeh	older has ceas	sed if the	officeholder has already notified ASIC by	y lodging a Form 370
•	Director					
Role of ceased officeholder Select one or more boxes	Secretary					
		director	- Person altern	ate for		
	7 11007 7 1000					
Date officeholder caased	Date of change		 B		,	
	Mi [O CI]	M] {Y	· · · · · ·		- NO NO.	
Name	The name of t Family name	he ceased off	iceholder is	Given r		
	WILKI	NSON		AN	DREW BARCLAY	
	Date of birth	15. H	N Q			
	[D D] [M Place of birth ('1	(state/c	country)	
	TO7/D	2 <i>r</i> 7			MOCIONIY OBJU	
						-
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						Continue D. Donn 4 of 2
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B2 Appoint company off	iceholder	to the second pay 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	Director	
Select one or more boxes	Secretary	
	Alternate din	
Date of appointment	Date of appointme	
		M] [Y Y]
	The name of the	appointed officeholder is (provide full given names, not initials)
Name	Family name	Given names Valid VI UK SUSAN
	Date of birth	
		0,69
	•	M] (Y Y) (state/country)
	Place of birth (to	ALACTO ALCA
		name was (provide full given names, not initials)
Former name Eg change by deed poll or marriage	Family name	Given names
ag aming + - / · · ·		
Residential address		address of the appointed officeholder is
	Street number 8	and Street name UE QUM WAY To PO BOX 953
	Suburb/City	State/Territory
	TOOD	WA - AUSTRALIA
	Postcode_	Country (if not Australia)
	6566	the mate for
If an 'Atternate director', for whom	The appointed Family name	Given names
Note: Where an Alternate director is		
appointed, please attach the terms of appointment to this change form.	Expiry date (if	applicable)
(Refer to the guide for annexure requirements)	M, (Q, Q), [M	d M, Lb. ∠1.
(Adminusus)	Alternate	e director terms of appointment attached
		6 September 2007
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