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
- 83 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

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this fodgement Company name Company details TODOYAY & DISTRICTS FINANCIAL PTY LTO Refer to guide for information about ACN/ABN Corporate key corporate key 67 090 105 249 42653260 Who should ASIC contact if there is a query about this form? Lodgement details Firm/organisation Contact name/position description VICKI NBLEY ASIC registered agent number (if applicable) Telephone number 9574 4948 Postal address or DX address 10 BOX 953 LOODYAY Total number of pages including this cover sheet 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 VICKI Capacity Director Company secretary Lodgement Send completed and signed forms to: For help or more information Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841. Telephone 1300 300 630 Email info.enquiries@asic.gov.au Web www.asic.gov.au Or lodge the form electronically by visiting the ASIC website www.asic.gov.au ASIC Form 484 Cover page 8 October 2008

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B1 Cease company	officeholder	
	npany officeholder has ceased to be a company officeholder. You need to	notify details separately for each ceased
Role of ceased officeholder Select one or more boxes	Director Secretary	
	Alternate director — Person alternate for	
Date officeholder ceased	Date of change	
Name	The name of the ceased officeholder is	
	Family name Given names AREENWAY PAULA	
	Date of birth	-
	Place of birth (fown/city) (state/country)	
	AUCKLAND NEW ZEALAI	10
R1 Continued Cons		
Use this section to notify if a composition officeholder.	e another company officeholder cany officeholder has ceased to be a company officeholder. You need to no	otify details separately for each ceased
Role of ceased officeholder	Director	
Select one or more boxes	Secretary	
	Alternate director ————————————————————————————————————	1004
Date officeholder ceased	Date of change	
vate omcenoider ceased	[D D] [M M] [Y Y]	
lame	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)	
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AS

P2 Appoint company	officeholder	
B2 Appoint company		
use this section to notify appointment of	of a company officer older. 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 2. O O 8 O 9 [D D] [W M] [Y Y]	
Name	The name of the appointed officeholder is (provide full given names, not initials)	
	Family name Given names MICHAFL PAUL	
	Date of birth	
	Place of birth (town/city) (state/country)	
	WONGON HILLS WA	
Former name	Their previous name was (provide full given names, not initials)	-
g change by deed poll or marriage	Family name Given names	
Residential address	The residential address of the appointed officeholder is	
	Street number and Street name REDWELL FARM LONG FORFST 0.0 B	
	Colon House	
	State/Territory	
	Postcode Country (if not Australia)	
	6568 WA.	
an 'Alternate director', for whom	The appointed 'Alternate director' is alternate for (person alternate for)	
Note:	Family name Given names	
Where an Alternate director is		
appointed, please attach the terms of appointment to this change form. (Refer to the guide for annexure requirements)	Expiry date (if applicable) [D D] [M M] [Y Y]	
	Alternate director terms of appointment attached	
	The state of appointment and the	

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B2 Appoint company of	officeholder	
Use this section to notify appointment of	f 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 2 0 0 9 9 0 9 D D M M Y Y	
Name	The name of the appointed officeholder is (provide full given names, not initials) Family name Given names ROBERT Date of birth Dignormal Millian	
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 610 TOODYAY &O Suburb/City State/Territory DVMBARTON 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	

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B2 Appoint company o	fficeholder	
	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 [D D] [M M] [Y Y]	
Name	The name of the appointed officeholder is (provide full given names, not initials) Family name CORNWELL Date of birth Date of D M M Y Y	
Former name	Place of birth (twm/city) (state/country) Soli HULL UNITED KING DVM Their previous name was (provide full given names, not initials)	
Eg change by deed poll or marriage	Family name Given names	
Residential address	The residential address of the appointed officeholder is Street number and Street name (BO4 JULIMAR RD Suburb/City State/Territory TOODYAY 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	

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B2 Appoint company of	ficeholder	
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 2 O O O B O O [D D] [M M] [Y Y]	
Name	The name of the appointed officeholder is (provide full given names, not initials) Family name KNDVLES MICHAEL JOSEPH	
	Date of birth Date of birth M M M M M Date of birth Date o	
	Place of birth (town/city) (state/country) SUBTACO [FRIH WA	
Former name	Their previous name was (provide full given names, not initials)	
Eg change by deed poll or marriage	Family name Given names MICHAFL JOSTPH	
Residential address	The residential address of the appointed officeholder is Street number and Street name	
	LOT RZO WEST TODDYAY RD	
	Suburb/City State/Territory	
	TOODYAY	
	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	

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