



Companies By
Quorum Services Pty Ltd

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Office: By Appointment Only



Change to Company Officeholders

Firm (If any)	_____	Date	_____
Contact Person	_____	Phone	_____
Email	_____	Ref No.	_____

COMPANIES BY QUORUM SERVICES PTY LTD provides a document preparation and registration service. COMPANIES BY QUORUM SERVICES PTY LTD does not provide legal or professional advice. Any person wishing to complete this procedure should obtain advice from a legal practitioner or accountant to ensure the change is suitable for its intended use.

Section A - Each item must be completed

Company Name _____

ACN _____

Outgoing Officeholders (Please ensure that date ceased is completed)

Officeholders Names

	Director	Shareholder	Date Ceased
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

Section B - Incoming Officeholders

Appointment Date _____

(Surname & Given Name(s) & Residential Address)

Name	_____	Director	<input type="checkbox"/>	Shareholder	<input type="checkbox"/>
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Address _____

Date of Birth _____ **Place of Birth** (Include State/ Country) _____

Appointment Date _____

(Surname & Given Name(s) & Residential Address)

Name	_____	Director	<input type="checkbox"/>	Shareholder	<input type="checkbox"/>
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Address _____

Date of Birth _____ **Place of Birth** (Include State/ Country) _____

Appointment Date _____

(Surname & Given Name(s) & Residential Address)

Director

Shareholder

Name _____

Address _____

Date of Birth _____ **Place of Birth** (Include State/ Country) _____

Appointment Date _____

(Surname & Given Name(s) & Residential Address)

Director

Shareholder

Name _____

Address _____

Date of Birth _____ **Place of Birth** (Include State/ Country) _____

Section C - Meeting (Please provide full address and date)

Location of meeting _____

Date of meeting _____ **Time** _____

Directors _____

Members _____

Chairperson _____
