

APPLICATION FORM

Update of Company Constitution

If you have any questions about completing the application form, please contact:

Christopher Davis

Principal

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Email: cdavis@mcw.com.au

Taryn Hartley

Principal

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Email: thartley@mcw.com.au

By completing and submitting the form you confirm as follows:

- a. It is the purchaser’s responsibility to ensure that the information supplied is correct.
- b. If new documents have to be prepared as a result of errors in the information a further fee will be payable.

Please ensure you complete all details below, and contact us with any questions you have prior to submitting the form.

PRICE

Documentation to update a Proprietary Limited Company Constitution (email delivery only) \$300 plus GST

PURCHASER’S DETAILS

Full Name

Name of firm (if applicable)

Email address

Telephone number

Fax number

Street Address

Suburb/City

State

Postcode

Postal Address
(if different from above)

Suburb/City

State

Postcode

PLEASE ATTACH A COPY OF THE FOLLOWING DOCUMENTS

Current constitution for the company (if available)

Current extract from ASIC for the company

Copies of any documents relating to the membership/shareholding of the company if ASIC’s details are not up to date

DETAILS OF COMPANY

Full name of Company

ACN

ABN

Registered Office

Street

Suburb/City

State

Postcode

IS THE COMPANY A SPECIAL PURPOSE COMPANY?

Yes

No

If yes please specify:

Home unit (HUNT)

Trustee of a Superannuation Fund (PSTC)

Charitable Purpose Company (PNPC)

DETAILS OF DIRECTORS

Director 1

Full name

Address (street address)

Suburb/Town

State

Postcode

Director 2 (if any)

Full name

Address (street address)

Suburb/Town

State

Postcode

Director 3 (if any)

Full name

Address (street address)

Suburb/Town

State

Postcode

DETAILS OF MEMBERS

Corporate member 1

Full name of Company

ACN

ABN

Registered Office

Street

Suburb/City

State

Postcode

Phone number

Fax number

Directors of corporate member 1

Full name

Address

Street

Suburb/City

State

Postcode

Full name

Address

Street

Suburb/City

State

Postcode

Corporate member 2

Full name of Company

ACN

ABN

Registered Office

Street

Suburb/City

State

Postcode

Phone number

Fax number

Directors of corporate member 2

Full name

Address

Street

Suburb/City

State

Postcode

Full name

Address

Street

Suburb/City

State

Postcode

DETAILS OF MEMBERS

Individual member 1

Full name

Address

Street

Suburb/City

State

Postcode

Individual member 2

Full name

Address

Street

Suburb/City

State

Postcode

DATE OF CHANGE

Proposed date of adoption of new company constitution:

RETURNING THIS FORM

After completing this form please either:

- print, sign, and fax it to McInnes Wilson Lawyers at (07) 3221 2921; or
- print, sign, scan, and email it to McInnes Wilson Lawyers at mcwonline@mcw.com.au; or

To print this form for signing click here:

To email this form to McInnes Wilson Lawyers, after confirming instructions below, click here:

CONFIRMATION OF INSTRUCTIONS

The purchaser agrees to purchase the goods and services indicated on this application form and acknowledges that legal or financial advice has not been given by McInnes Wilson Lawyers in relation to the preparation of the relevant document(s).

Signed by purchaser

Date (dd/mm/yy)

OR

Confirmed by purchaser

Date (dd/mm/yy)

Note: This application form will not be processed by McInnes Wilson Lawyers unless this section is completed.

CREDIT CARD PAYMENTS

Please debit the following credit card for the supply of goods and services indicated on this application form.

Note: Payment by credit card will incur a fee of 1.07% (incl GST) for VISA and MasterCard, and 3% (incl GST) for AMEX, on the GST inclusive price.

Credit card:

Visa MasterCard American Express

Total Remitted \$

Expiry date

plus credit card fee specified above

Cardholder's Name

Card Number

Cardholder's Signature

Date