

## **Application for Registration** (General)

Applicant's details								
The applicant is the person w	vho is auth	orized to act	on behalf	of the ori	ginal memb	oers regar	ding this re	gistration
Applicant's details	Title							
Firs	t name Rh	nys			Middle name	Geoffrey		
Last name		ilson						
Residential address		Smyth Street						
	G`	YMPIE QLD				Pos	tcode 4570	ı
Corporation details	}							
Proposed name of corporation		ced Up Indig	enous Co	poration				
Australian Business Numb (ABN)	er							
Addresses								
Main place of business		Smyth Street						
						1		
	G'	YMPIE QLD				Pos	tcode 4570	
Registered office address (ROA)/		Smyth Street						
document access address	` '							
	G`	YMPIE QLD				Pos	tcode 4570	
Corporation's postal address		Smyth Street						
	0)	VARDIE OLD					11. 4570	
	G	YMPIE QLD				Pos	tcode 4570	
Contact numbers Tele	ephone 04	174700892			Fax			
Corporation's email addres	ss are	ced.up@outl	ook.com					
Preferred method of communication	Er	mail						
hanna a Bagistarad Nativa		S						
		X						
Corporation size	Sm	nall X	Medium	L	_arge			
Liability of members		embers not l	iable X					
		Members I	iable	> Exten	t of liability			
				0.00			_	

## Contact person's/secretary's details Position Contact person for a small or X Secretary of a large corporation medium corporation Title Geoffrey First name Rhys name Last name Wilson Residential address 7 Smyth Street GYMPIE QLD Postcode 4570 Members' details **Full name** Rhys Geoffrey Wilson **Directors' details Director 1** Title Middle Geoffrey First name Rhys Last name Wilson Previous name(s) (if any) Residential address 7 Smyth Street

GYMPIE QLD

Up to 1 year

This director will hold office for:

Postcode 4570

Up to 2 years X