



## Applicant's details

The applicant is the person who is authorized to act on behalf of the original members regarding this registration

Applicant's details	Title	Mr		
	First name	Michael	Middle name	James
	Last name	Starkey		
Residential address	19 Gerrard ave			
	paralowie SA		Postcode	5108

## Corporation details

Proposed name of corporation	Bira Gargu Aboriginal Corporation			
Australian Business Number (ABN)				
Addresses				
Main place of business	19 Gerrard ave			
	Paralowie SA	Postcode	5108	
Registered office address (ROA)/ document access address (DAA)	19 Gerrard ave			
	Paralowie SA	Postcode	5108	
Corporation's postal address	19 Gerrard ave			
	Paralowie SA	Postcode	5108	
Contact numbers	Telephone	0421617816	Fax	
Corporation's email address	micks@marakundilje.com.au			
Preferred method of communication	Email			
Does the corporation intend to become a Registered Native Title Body Corporate?	Yes <input checked="" type="checkbox"/>			
	No			
Corporation size	Small <input checked="" type="checkbox"/>	Medium	Large	
Liability of members	Members not liable <input checked="" type="checkbox"/>			
	Members liable	> Extent of liability		
		0.00		

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## Contact person's/secretary's details

Position	Contact person for a small or X medium corporation	Secretary of a large corporation
Title	<input type="text" value="Mrs"/>	
First name	<input type="text" value="Barbara"/>	Middle name <input type="text"/>
Last name	<input type="text" value="Manolas"/>	
Residential address	<input type="text" value="18 Anderson Crescent"/>	
	<input type="text"/>	
	<input type="text" value="PORT AUGUSTA WEST SA"/>	Postcode <input type="text" value="5700"/>

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## Members' details

### Full name

<input type="text" value="Mr Robert Starkey"/>
<input type="text" value="Mr Michael Starkey"/>
<input type="text" value="Mr Simon Prideaux"/>
<input type="text" value="Mr David Pearson"/>
<input type="text" value="Leilani Starkey-Treloar"/>
<input type="text" value="Stanley Starkey"/>
<input type="text" value="Sabrina Starkey"/>

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## Directors' details

### Director 1

Title	<input type="text" value="Mr"/>	
First name	<input type="text" value="David"/>	Middle name <input type="text"/>
Last name	<input type="text" value="Pearson"/>	
Previous name(s) (if any)	<input type="text"/>	
Residential address	<input type="text" value="Lakeview Transitional Accommodation Centre"/>	
	<input type="text" value="Buzzacott Close"/>	
	<input type="text" value="Port Augusta SA"/>	Postcode <input type="text" value="5700"/>

This director will hold office for:      Up to 1 year      Up to 2 years X

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### Director 2

Title	<input type="text"/>	Middle	<input type="text"/>
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First name	Leilani	name	
Last name	Starkey-Treloar		

Previous name(s) (if any)

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Residential address

18 Taylor Court	
PORT AUGUSTA WEST SA	Postcode 5700

This director will hold office for:

Up to 1 year

Up to 2 years X

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**Director 3**

Title

Mr
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First name

Michael
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Middle name

James
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Last name

Starkey
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Previous name(s) (if any)

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Residential address

19 Gerrard Avenue	
PARALOWIE SA	Postcode 5108

This director will hold office for:

Up to 1 year

Up to 2 years X

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**Director 4**

Title

Mr
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First name

Robert
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Middle name

John
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Last name

Starkey
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Previous name(s) (if any)

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Residential address

18 Anderson Crescent	
PORT AUGUSTA WEST SA	Postcode 5700

This director will hold office for:

Up to 1 year

Up to 2 years X

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**Director 5**

Title

Mr
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First name

Simon
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Middle name

john
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Last name 

Prideaux
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Previous name(s) *(if any)*

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Residential address 

963 Denial Bay Road		
DENIAL BAY SA	Postcode	5690

This director will hold office for:      Up to 1 year      Up to 2 years ☒

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