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APN | Funds Management

2 January, 2007

BSX Announcements Office Bendigo Stock Exchange Ltd PO Box 323 Bendigo VIC 3552

By email:

announcements@bsx.com.au

ANNOUNCEMENT

APN Regional Property Fund (BSX code: APR) - ARSN: 110 488 821

Dear Sir/Madam

Re. Change in Trust Auditor

APN Funds Management Limited (**APNFM**) acting in its capacity as responsible entity of the APN Regional Property Fund (**Trust**) wishes to announce that KPMG has resigned as auditor of the Trust subsequent to the Australian Securities and Investments Commission giving its consent in accordance with section 331AC of the *Corporations Act 2001* (Cth).

APNFM is pleased to announce that it has appointed Deloitte Touche Tohmatsu (**Deloitte**) to be the new auditor of the Trust. The necessary consent has been received from Deloitte.

Please find attached the following forms previously lodged with ASIC:

- 1. Form 5133 Notification of Resignation, Removal or Cessation of a Scheme Auditor.
- 2. Form 5137 Notification of Appointment of Scheme Auditor

Yours faithfully

APN FUNDS MANAGEMENT LIMITED

Peter Nicholson Company Secretary

The information contained in this email transmission may be confidential and may also be the subject of legal professional privilege. If you are not the intended recipient, any use, disclosure or copying of any part of this transmission is unauthorised. If you have received this transmission in error we apologise for any inconvenience which you may have been caused and request that you telephone our office on 61 3 8656 1000.

Australian S	Securities	&
Investments	Commis	sion

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Form 5133 Corporations Act 2001 331AC(7), 331AD

Notification of resignation, removal or cessation of a registered scheme auditor

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement Scheme details Registered scheme name Responsible entity name ACNVABN∴ Lodgement details Who should ASIC contact if there is a query about this form? NICHOLSON ASIC registered agent number (if applicable) Please provide an estimate of the time taken to complete this form. 1. Details of resignation, removal or cessation Notice was received of the resignation of the auditor/s Date of receipt of notice of resignation The auditor/s was/were removed from office Date of removal The auditor is deceased: Date of death The auditor has been disqualified for reasons Date of disqualification specified under Division 2 of Part 2M.4 of the Corporations Act 2001 The scheme is being wound up (refer section 331AD Date winding up commenced of the Corporations Act 2001) <u>D] [M</u>

2. Details of auditor(s	5)
	Additor registration number (for individual auditor or authorised audit company)
	Family name Given name
	OR Company name
	ACNIABN
	OR Firm name (if applicable)
	KPMG
	Office; unit; level
	Street number and Street name
	147 COLLINS STREET
	Suburb/City State/Territory
	Postcode: Country (if not Australia:
	Auditor registration number (for individual auditor of authorised audit company)
	· · · · · · · · · · · · · · · · · · ·
•	Family name Given name
C	OR Authorised audit company name
	ACN/ABN
0	OR Firm name (if applicable)
	Office, unit; level
	Suburb/City State/Territory
	olate remuly 1922-1933
	Postcode Country (if not Australia)
Cianatura	I certify that the information in this form is true and complete:
Signature This form must be signed by a director or	
secretary of the responsible entity	Name PETER NICHOLSON
	Signature
	Unione.
	Date signed Date signed
Lodgement	Send completed and signed forms to: For help or more information
•	Australian Securities and investments Commission, Telephone 03 5177 3988
	Web www.asic.gov.au

Australian	Sec	uriti	es 🖟	&
Investment	ts C	omn	iss	sion

Form 5137 Corporations Act 2001 331AAA(1), 331AAB(1), Regulation 2M.4.01

Notification of appointment of scheme auditor

If there is insufficient space in any section of the form, you may photocopy the relevant page(s) and submit as part of this lodgement

Scheme details	Registered scheme name
	APN REGIONAL PROPERTY FUND
	ARSN
	110 488 821
	Responsible entity name
	APN FUNOS MANAGEMENT LTO-
	AGNABN
	60 080 674 479
Lodgement details	Who should ASIC contact if there is a query about this form?
	Name: Name to the state of the
	PETER NICHOLSON
	ASIO registered agent number (if applicable)
	Telephone number
	Postal address
	LEVEL 30, 101 COLLINS STAEET
	MELGOURIVE VIC 3000
	Please provide an estimate of the time taken to complete this form.
	Thisminsmens
Auditor details	Auditor registration number (for individual auditor or authorised audit company)
	Family name
	Company name
	Company name, and the second s
	ACNIABN
	Not write the second se
	or or a second s
	Firm name (if applicable)
	DELOITE TOUCHE TOUMATSUL

Continued Auditor details	Office, unit, level
	Street number and Street name
	180 LONSVALE STREET
	Suburb/City State/Territory
	Postcode Country (if not Australia
	Date of appointment Date of appointment Date of appointment Date of appointment Note of appointment
Signature	The new auditor (whether person, firm or authorised audit company) has consented in writing to the
This form must be signed by a director or secretary of the responsible entity.	appointment as required by subsections 328A(1)(a) & (b). I certify that the information in this form is true and complete.
•	Name DETER MICHOLSON
	Signature
	Plinks -
	Capacity Director
	⊠ Company secretary
	Date signed Constant of the signed of the s
Lodgement	Send completed and signed forms to: Australian Securities and Investments Commission, Telephone 03 5177 3988

PO Box 4000, Gippstand Mail Centre VIC 3841.

Email info.enquiries@asic.gov.au www.asic.gov.au

Web