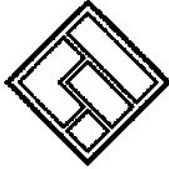


ASIC registered agent number \_\_\_\_\_  
 lodging party or agent name \_\_\_\_\_  
 office, level, building name or PO Box no \_\_\_\_\_  
 street number & name \_\_\_\_\_  
 suburb/city \_\_\_\_\_ state/territory \_\_\_\_\_ postcode \_\_\_\_\_  
 telephone { } \_\_\_\_\_  
 facsimile { } \_\_\_\_\_  
 DX number \_\_\_\_\_ suburb/city \_\_\_\_\_

	ASS. PROC. <input type="checkbox"/>	REQ-A <input type="checkbox"/>	REQ-P <input type="checkbox"/>
--	-------------------------------------	--------------------------------	--------------------------------



Australian Securities & Investments Commission

form **909**

Notification of  
**office at which register is kept**

Corporations Act 2001  
**100(1)(d), 172, 271, 1302(4)  
 601CZC**

company name Bellarine Peninsula Community Branch Ltd.  
 A.C.N. 089107657

**Details of Register**

- Register of members
- Register of options
- Register of charges
- Register of holders of debentures
- Register of debenture holders for non-companies

**Details of change**

- change from registered office
  - change from principal place of business
  - change from other address
- date of change (d/m/y) / /  
 date of change (d/m/y) / /  
 date of change (d/m/y) 30/6/2009

Details of other address where changed from:

at the office of Computershare Investor Services Pty Limited.  
 office, level, building name Yarra Falls  
 street number & name 452 Johnston Street  
 suburb/city Abbotsford state/territory Vic postcode 3065

**New address**

at the office of AFS & Associates  
 office, level, building name \_\_\_\_\_  
 street number & name 61-65 Bull Street  
 suburb/city Bendigo state/territory Vic postcode 3550  
 Does the company occupy these premises?  yes  no

If NO, name of occupier \_\_\_\_\_

occupier's consent (Tick box to assent to statement required by subsection 100(1)(d))

- The occupier of the premises has consented in writing to the use of the new address as the place for keeping of the register and has not withdrawn that consent.

**Signature**

print name Sandra Baldwin capacity Company Secretary  
 sign here [Signature] date 19/5/09

Small Business (less than 20 employees), please provide an estimate of the time taken to complete this form

**Include**

- The time actually spent reading the instructions, working on the question and obtaining the information
- The time spent by all employees in collecting and providing this information

hrs \_\_\_\_\_ mins \_\_\_\_\_