**Australian Securities & Investments Commission** 

| 1 |  |  |
|---|--|--|
|   |  |  |
|   |  |  |

**Form 201** 

Corporations Act 2001

## Application for registration as an Australian company

Use this form to apply to ASIC for registration of a company under the Corporations Act 2001.

#### **Related Forms**

208 - Notification of details of shares allotted other than for cash

| 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 |   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| Lodgement details  | Who should ASIC contact if there is a query about this form? ASIC registered agent number (if applicable) |  |  |  |  |  |
| an image of this form will be available as art of the public register.   | Firm/organisation   |  |  |  |  |  |
|  | Firm/organisation   |  |  |  |  |  |
|  | Contact name/position description  Telephone number (during business hours)                               |  |  |  |  |  |
|  | Email address (optional)  |  |  |  |  |  |
|  | Postal address  |  |  |  |  |  |
|  | Suburb/City State/Territory Postcode  |  |  |  |  |  |
|  |   |  |  |  |  |  |
| Details of the company   | Company will be taken to be registered.  Give State or Territory  |  |  |  |  |  |
|  | Does the company have a proposed company name?  |  |  |  |  |  |
|  | Yes If yes, the proposed company name is  Name reservation number (if any)                                |  |  |  |  |  |
| Update No 1  | No The company name on registration will be its Australian Company Number (ACN).                          |  |  |  |  |  |
|  | Tick the legal elements that apply  |  |  |  |  |  |
|  | PTY LTD PTY. LTD PTY LTD. PTY LIMITED  PTY LIMITED PROPRIETARY LTD PROPRIETARY LTD. PROPRIETARY LIMITED   |  |  |  |  |  |

#### Continued ... Further details of the company Is the proposed name identical to a registered business name(s)? If yes, I declare that I hold, or am registering the company for the holder(s) of, the identical business name(s), the registration details of which are listed below. ABN or For business names registered before Previous business number Previous state/territory of registration 28 May 2012 without an ABN. Type of company Class of company Special purpose (if applicable) proprietary company limited by shares unlimited with a share capital home unit (HUNT) superannuation trustee (PSTC) charitable purposes only (PNPC) Jpdate No 2 public company limited by shares limited by guarantee unlimited with a share capital no liability superannuation trustee (ULSS) Update No 3 charitable purposes only (ULSN) If this is a special purpose company, tick the box below to make the declaration. Special purpose company Refer to Guide for descriptions of I declare that this company is a special purpose company as defined under Regulation 3 of the Corporations special purpose companies. (Review Fees) Regulations 2003. Governance of a public company A public company that is: The company will rely entirely on replaceable rules · a superannuation trustee, or for charitable purposes only, The company has a constitution must have a constitution. A proposed public company which has adopted a "Constitution" must lodge a copy of the constitution with this application. Update No 4 If the proposed company is to be a public company limited by guarantee, state the amount of the guarantee that each member agrees to in writing. The amount of the member's guarantee is (insert amount) At the office of, C/- (if applicable Registered office You cannot use a PO Box address Office, unit, leve Street number and Street name Suburb/City State/Territory Postcode

| Continued Further  | details of the company  |  |  |  |  |  |
|--|---|--|--|--|--|--|
|  | Does the company occupy the premises?   |  |  |  |  |  |
|  | Yes No  |  |  |  |  |  |
|  | If no, name of occupier   |  |  |  |  |  |
|  | Occupier's consent (Select box to indicate the statement below is correct)  |  |  |  |  |  |
|  | The occupier of the premises has consented in writing to the use of the specified address as the address o the registered office of the company and has not withdrawn that consent. |  |  |  |  |  |
| Office hours For a public company  a. Registered office of a public co pany is open to the public each business day from at lead and 2 pm to 4 pm. |   |  |  |  |  |  |
|  | b. Registered office of a public co pany is open to the public each business day for at least 3 hours between 9 am and 5 pm.  |  |  |  |  |  |
|  | If b, insert hours open from am/pm close to am/pm   |  |  |  |  |  |
| Principal place of business  | If same as registered office, write "as above".  Office, unit, leve   |  |  |  |  |  |
|  | Street number and Street name   |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  | Suburb/City State/Territory Postcode  |  |  |  |  |  |
|  | Country (if not Australia)  |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  |   |  |  |  |  |  |
| Identify ultimate hold   | ing company   |  |  |  |  |  |
|  | Will the company have an ultimate holding company upon registration?  |  |  |  |  |  |
|  | Yes   |  |  |  |  |  |
|  | If yes, provide the following details of the ultimate holding company  Company name   |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  | ACN/ARBN/ABN Country of incorporation (if not Australia)  |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  | L No  |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  |   |  |  |  |  |  |
|  |   |  |  |  |  |  |

### **Appoint officeholder**

Give details below of the person(s) who have consented in writing to become a director/secretary of the company.

A public company must have a minimum of 3 directors (2 resident in Australia) and 1 secretary (resident in Australia). A proprietary company must have a minimum of 1 director (resident in Australia). The office of secretary is optional, but if appointed one must reside in Australia.

Officeholder(s) appointment date shall be effective from the beginning of the day on which the company becomes registered

The officeholder's residential address is required

| Office held  Director  Secretary |                          |
|----------------------------------|--------------------------|
| Family name                      |                          |
|                                  |                          |
| Given names                      |                          |
|                                  |                          |
| Former name                      |                          |
| care of                          |                          |
|                                  |                          |
| unit, floor, building name       |                          |
|                                  |                          |
| Street number and Street name    |                          |
|                                  |                          |
| Suburb/City                      | State/Territory Postcode |
|                                  |                          |
| Country (if not Australia)       |                          |
|                                  |                          |
| Date of birth                    |                          |
| DD / MM / YYYY                   |                          |
| Place of birth (town/city)       | (state/country)          |
|                                  |                          |

### **Appoint officeholder**

Give details below of the person(s) who have consented in writing to become a director/secretary of the company.

A public company must have a minimum of 3 directors (2 resident in Australia) and 1 secretary (resident in Australia). A proprietary company must have a minimum of 1 director (resident in Australia). The office of secretary is optional, but if appointed one must reside in Australia.

Officeholder(s) appointment date shall be effective from the beginning of the day on which the company becomes registered

The officeholder's residential address is required

| Office held  Director Secretary            |
|--|
| Family name                                |
|  |
| Given names                                |
|  |
| Former name                                |
| care of                                    |
| unit, floor, building name                 |
| Street number and Street name              |
| Suburb/City State/Territory Postcode       |
| Country (if not Australia)                 |
| Date of birth  DD / MM / YYYY              |
| Place of birth (town/city) (state/country) |

| Details of n                    |                           | and ad | dress of each                        | nerson who conser             | nts to become a memb       | er                              |                     |                            |  |  |  |
|---------------------------------|---------------------------|--------|--------------------------------------|-------------------------------|----------------------------|---------------------------------|---------------------|----------------------------|--|--|--|
| Member details and shareholding |                           | and da | Family name                          |                               |                            |                                 |                     |                            |  |  |  |
| snarenoiding                    |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Given names                          |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | OR Company name                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | ACN/ARBN/ ABN                        |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
| Address of in                   | dividual or               |        | care of                              |                               |                            |                                 |                     |                            |  |  |  |
| company                         |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Office, unit, level or PO box number |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Street number and Street name        |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Cassinanion and Sussinanio           |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Suburb/City State/Territory          |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Postcode                             |                               | country (if not Australia) |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
| Share class code                | Number of shares taken up |        | unt agreed to<br>er share            | Total \$ paid on these shares | Amount unpaid per share    | Total \$ unpaid on these shares | Fully paid<br>(y/n) | Beneficially<br>held (y/n) |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           | 1      |                                      |                               | 1                          |                                 |                     |                            |  |  |  |

| Details of n                    |                           | and ad | dress of each                        | nerson who conser             | nts to become a memb       | er                              |                     |                            |  |  |  |
|---------------------------------|---------------------------|--------|--------------------------------------|-------------------------------|----------------------------|---------------------------------|---------------------|----------------------------|--|--|--|
| Member details and shareholding |                           | and da | Family name                          |                               |                            |                                 |                     |                            |  |  |  |
| snarenoiding                    |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Given names                          |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | OR Company name                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | ACN/ARBN/ ABN                        |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
| Address of in                   | dividual or               |        | care of                              |                               |                            |                                 |                     |                            |  |  |  |
| company                         |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Office, unit, level or PO box number |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Street number and Street name        |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Cassinanion and Sussinanio           |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Suburb/City State/Territory          |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Postcode                             |                               | country (if not Australia) |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
| Share class code                | Number of shares taken up |        | unt agreed to<br>er share            | Total \$ paid on these shares | Amount unpaid per share    | Total \$ unpaid on these shares | Fully paid<br>(y/n) | Beneficially<br>held (y/n) |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           | 1      |                                      |                               | 1                          |                                 |                     |                            |  |  |  |

| 6 Details of                    |                           | and ad        | dress of each                        | person who consen             | nts to b | pecome a membe             | r.                              |                  |                         |  |  |
|---------------------------------|---------------------------|---------------|--------------------------------------|-------------------------------|----------|----------------------------|---------------------------------|------------------|-------------------------|--|--|
| Member details and shareholding |                           |               | Family name                          |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | Given name                           | es                            |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | OR OR                                |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      | any name                      |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | ACN/ARBN/ ABN                        |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | ACIVARDIV ADIV                       |                               |          |                            |                                 |                  |                         |  |  |
| Address of in                   | dividual or               |               | care of                              | care of                       |          |                            |                                 |                  |                         |  |  |
| company                         |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | Office, unit, level or PO box number |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | Street number and Street name        |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | Suburb/City State/Territory          |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               | Postcode country (if not Australia)  |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
| Share class code                | Number of shares taken up | Amou<br>pay p | unt agreed to<br>er share            | Total \$ paid on these shares |          | Amount unpaid<br>per share | Total \$ unpaid on these shares | Fully paid (y/n) | Beneficially held (y/n) |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |
|                                 |                           |               |                                      |                               |          |                            |                                 |                  |                         |  |  |

| Details of n                    |                           | and ad | dress of each                        | nerson who conser             | nts to become a memb       | er                              |                     |                            |  |  |  |
|---------------------------------|---------------------------|--------|--------------------------------------|-------------------------------|----------------------------|---------------------------------|---------------------|----------------------------|--|--|--|
| Member details and shareholding |                           | and da | Family name                          |                               |                            |                                 |                     |                            |  |  |  |
| snarenoiding                    |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Given names                          |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | OR Company name                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | ACN/ARBN/ ABN                        |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
| Address of in                   | dividual or               |        | care of                              |                               |                            |                                 |                     |                            |  |  |  |
| company                         |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Office, unit, level or PO box number |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Street number and Street name        |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Cassinanion and Sussinanio           |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Suburb/City State/Territory          |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        | Postcode                             |                               | country (if not Australia) |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
| Share class code                | Number of shares taken up |        | unt agreed to<br>er share            | Total \$ paid on these shares | Amount unpaid per share    | Total \$ unpaid on these shares | Fully paid<br>(y/n) | Beneficially<br>held (y/n) |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           |        |                                      |                               |                            |                                 |                     |                            |  |  |  |
|                                 |                           | 1      |                                      |                               | 1                          |                                 |                     |                            |  |  |  |

### **Share structure table**

Details of shares issued by the company. Please show all details of shares that the company has on issue at the time of this application.

#### Standard share codes

Refer to the table for the share class codes for sections 5 and 6.

| Share class code | Full title      | Share class code | Full title                           |
|------------------|-----------------|------------------|--------------------------------------|
| A                | A               | PRF              | preference                           |
| В                | Betc            | CUMP             | cumulative preference                |
| EMP              | employee's      | NCP              | non-cumulative preference            |
| FOU              | founder's       | REDP             | redeemable preference                |
| LG               | life governor's | NRP              | non-redeemable preference            |
| MAN              | management      | CRP              | cumulative redeemable preference     |
| ORD              | ordinary        | NCRP             | non-cumulative redeemable preference |
| RED              | redeemable      | PARP             | participative preference             |
| SPE              | special         |                  |                                      |

|                              | SPE                        | special                            |  |                                   |   |
|------------------------------|----------------------------|------------------------------------|--|-----------------------------------|---|
| If you are using the standa  | rd share class codes you d | o not need to provide the full tit | le for the shares, just the share  | class code.                       |   |
| If you are not using the sta | ndard share class code, en | ter a code of no more than 4 le    | tters and then show the full title.  |                                   |   |
| Share<br>Class Code          | Full title if not standard |                                    | Total number of shares   | Total amount paid on these shares | Total amount<br>unpaid on these<br>shares |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              |                            |                                    |  |                                   |   |
|                              | Yes If yes                 | Public companies                   | No be issued under If no less estifying that all stamp duties have and either a Form 208 or a copy of the less than the less tha | e been paid.                      | 6 Details of members.                     |

### Declaration by applicant

I/we apply for registration of a company on the basis of the information in this form and any attachments. I/we have the necessary written consents and agreements referred to in the application concerning the member and officeholders and I/we shall give the consents and agreements to the company after the company becomes registered. The information provided in this application and in any annexures is true and correct at the time of signing.

| Signature of applicant   |   |
|--|---|
|  | Payment has been attached   |
| Provide family and given names OR corporation name (include ACN/ARBN if applicable)  | Name of applicant  Capacity of applicant                                  |
| If the applicant is an individual - 1 signature required. If the applicant is a corporation - a director or secretary to sign. |   |
| If the agent for the applicant is a firm – a member/partner of the firm to sig   | Agent for individual or corporation Name of agent  Signature of applicant |
|  | Date signed  [D D] [M M] [Y Y]  |

#### Lodgement

Send completed and signed forms to: Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841

#### For more information

Web <u>www.asic.gov.au</u>

Need help? www.asic.gov.au/question

Telephone 1300 300 630

## **Guide:**

**Form 201** 

Corporations Act 2001

### Application for registration as an Australian company

This guide does not form part of the prescribed form. It is included by ASIC to assist you in completing and lodging the Form 201.

Use this form to apply to ASIC for registration of a company under the Corporations Act 2001 (Cth) (Corporations Act).

#### **Related Forms**

208 - Notification of details of shares allotted other than for cash

207Z - Certification of compliance with stamp duty la

| Signature                           | This form must be signed by:     the applicant; or     a person who has consented to become a director or secretary or member of the company; or     the agent for the applicant, being a person who has authority to sign the form on behalf of the applicant(s).   |
|-------------------------------------|--|
| Lodgement period                    | Nil – to be lodged when required.  |
| Lodging fee                         | A lodgement fee applies to this form.  For information on fees refer to www.asic.gov.au/forms.   |
| Officeholder address                | Officeholders addresses must be their usual current residential address. An alternative address may only be used where we approve an application under s205D of the Corporations Act.  |
| Replaceable rules and constitutions | The Corporations Act contains 'replaceable rules' which apply to all companies—except companies where the sole member is also the sole director—and may be used to govern the internal running of the company. Companies may displace some of the replaceable rules by a constitution and be governed by a combination of replaceable rules for some things and their own constitution for others. Where the proposed company is to be governed by a combination of replaceable rules and a constitution, please tick the box that says 'The company has a constitution'.  A company with more than one member/director may adopt a constitution provided all persons who have agreed to become a member of the company agree to the terms and conditions. |
|                                     | If a written constitution governs the company, a copy of the constitution must also be lodged. A public company that is:  • a superannuation trustee, or   |

#### Company names

A name is available unless it is identical to:

 for charitable purposes only, must have a written constitution.

- a name that is currently reserved or registered under the Corporations Act for another body, or
- a name that is held or registered on the business names register in respect of another individual or body who is not the person applying to have the name, or
- is unacceptable for registration under the Corporations Regulations 2001.

If it is proposed to register a name which is identical to a registered business name(s), we must be satisfied that the proposed company is entitled to the use of the name under s147. Therefore either the owner, or someone registering the company for the owner of the business name, must be the applicant for registration and the questions regarding the business name(s) shown on the Form 201 must be completed.

The information concerning identical business names on the Form 201 may instead be given in a statement attached to the Form 201 (as an annexure) under the heading 'Declaration Regarding Registered Business Name(s)'. Be sure to provide the same information as is required on the Form 201. The statement must be dated and signed by the applicant as being 'true and correct' as follows: 'I declare that the information given in this statement is true and correct'.

#### Special purpose companies

The different types of special purpose companies that can be established on registration are:

#### Charitable purposes only

A company whose constitution requires it to pursue charitable purposes only and to apply its income in promoting those purposes; and prohibits the company making distributions to its members and paying fees to its directors; and requires its directors to approve all other payments the company makes to them.

#### Home unit company

A proprietary company:

- that is the proprietor of land on which a building is erected and divided into separate residential areas and areas for common usage
- whose members are entitled to exclusive occupation of one or more of those areas and use of the common areas, and
- which operates solely to facilitate the rights of those members in relation to their exclusive occupation of those residential areas and maintenance of the common areas.

#### Superannuation trustee company

A company that acts solely as the trustee of a regulated superannuation fund within the meaning of s19 of the Superannuation Industry (Supervision) Act 1993 and whose constitution prohibits the distribution of its income or property among its members.

#### Other types of companies

A no-liability company (NL) must be a public company. The Corporations Act limits the activities of a NL company to mining purposes only and obliges a NL company's constitution to state, amongst other things, that its sole objects are mining purposes only.

A company limited by guarantee (LMGT) must be a public company. In order for a LMGT company to qualify as a 'special purpose company' as defined by the Corporations (Review Fees) Regulations 2003, its constitution must contain, amongst other things, provisions which limit its activities to charitable purposes only.

# Shares issued other than for cash or under a written contract

#### For public companies

If shares will be issued for other than cash, then a Form 208 Notification of details of shares allotted other than for cash, or a copy of the 'contract' must be lodged.

If the shares will be issued under written contract, then a Form 207Z Certification of compliance with stamp duty law must also be lodged.

#### For proprietary companies

If shares will be issued under written contract or issued for other than cash, a Form 207Z Certification of compliance with stamp duty law must be lodged.

### How to provide additional information

#### Photocopied Form 201 pages

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.

#### **Annexures**

If there is insufficient space in any section of the form, you may alternately submit annexures as part of this lodgement

To make any annexure conform to the regulations, you must

- 1. use A4 size paper of white or light pastel colour with a margin of at least 10mm on all sides
- 2. show the company name and ACN or ARBN
- 3. number the pages consecutively
- 4. print or type in BLOCK letters in dark blue or black ink so that the document is clearly legible when photocopied
- 5. mark the annexure with an identifying letter or symbol eg a,b,c or 1,2,3 etc.
- 6. endorse the annexure with the words:

This annexure (mark) of (number) pages referred to in form (form number and title)

7. sign and date the annexure

The annexure must be signed by the same person(s) who signed the form.

#### **Privacy**

The information provided to ASIC in this form may include personal information. Please refer to our privacy policy (www.asic.gov.au/privacy) for more information about how we handle your personal information, your rights to seek access to and correct personal information, and to complain about breaches of your privacy.

#### Lodgement

Send completed and signed forms to: Australian Securities and Investments Commission, PO Box 4000, Gippsland Mail Centre VIC 3841

#### For more information

Web <u>www.asic.gov.au</u>
Need help? www.asic.gov.au/question

Telephone 1300 300 630