

CORPORATE AFFAIRS COMMISSION



FORM CAC/IT 2

CHANGE OF NAME PURSUANT TO SECTION 680

NAME OF ORGANISATION	<input type="text"/>
CERTIFICATE NO	<input type="text"/>
FILE NO	<input type="text"/>

A. PRESENT NAME OF ORGANIZATION

B. PROPOSED NAME OF ORGANIZATION

C. ATTACHMENTS

COPY OF MINUTES OF MEETING WHERE IT WAS
AGREED TO CHANGE TRUSTEE ATTACHED

YES NO

EVIDENCE OF NEWSPAPER PUBLICATIONS ATTACHED

YES NO

COPY OF NOTICE DISPLAYED IN
HEADQUARTERS AND BRANCHES ATTACHED

YES NO

UPDATED ANNUAL RETURNS YES

YES NO

Signature of Chairman

Signature of Secretary

Name of Chairman & Tel. No.

Name of Secretary & Tel. No.

Presented for filing by:

Name: _____ Accreditation No. (if applicable): _____

Address: _____

Tel. No. & E-mail: _____ Signature & Date: _____