

Company Registrations I Trusts I Super Funds

phone: (08) 8231 6661

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COMPANY DEREGISTRATION FORM

APPLICANT DETAILS	- NAME			
ADDRESS				
PHONE		EMAIL		
PARTY RESPONSIBLE	FOR PAYMENT - NA	ME		
ADDRESS				
DETAILS OF COMPAN	Y TO BE DEREGISTE	RED		
NAME OF COMPANY				
A.C.N. NUMBERDATE OF DEREGISTRATION				
LIST ALL CURRENT O	FFICEHOLDERS AND	MEMBERS IN THE COM	IPANY	
		□ SECRETARY		
FULL NAME				
ADDRESS				
POSITION HELD	□ DIRECTOR	□ SECRETARY		
FULL NAME				
ADDRESS				
POSITION HELD	□ DIRECTOR	□ SECRETARY	□ MEMBER	
FULL NAME				
ADDRESS				
POSITION HELD	□ DIRECTOR	□ SECRETARY	□ MEMBER	
FULL NAME				
ADDRESS				
DECLARATION				
The following statement	s listed below are corre	ect		
 All members of the cor The company is not ca The company's assets The company has no c The company is not a The company has paid 	arrying on business are worth less than \$1 outstanding liabilities party to any legal proce	000	ations Act 2001.	
PAYMENT DETAILS	□ VISA	□ MAS	TERCARD	
Credit Card Number			Expiry Date	
Name of CardholderSignature				
Or Dira	ct Denosit Shelf	rom BSR: 105-900	Account No: 978220340	

Amount Due: \$267.00