Vanuatu Financial Services Commission

Form 2 | Application for change of details of the Committee of a Charitable Association

Section 13 Charitable Associations (Incorporation) Act [Cap. 140]

Note

If there is insufficient space on the form to supply the information required, attach a separate sheet containing the information set out in the prescribed format.

The information on this form must be either typewritten or printed legibly.

For office use only Document number	У
Plo	ace barcode here

1. Change of name of Charitable Association Committee

The current name of the Committee:	
The new name of the Committee: Note: The name must end in 'Committee (Inc.)'.	

NOTE: If the name has changed, a new copy of the Constitution must also be attached.

2. Change of Address Details

New registered office: This must be a physical address at which any legal process can be served.	
	Province or Municipality:
Postal address of the	
Association (if any)	
Postal address to which	
communications from	
the Registrar may be sent (this may	
be the same as the registered office	Province or Municipality:
only if the postal service delivers	

3. Change of Committee Members

to that address).

Committee Members resigned or removed:

Full name (including any former name):	Full name (including any former name):
Reason (eg resignation or removal):	Reason (eg resignation or removal):
Date of resignation or removal:	Date of resignation or removal:
Full name (including any former name):	Full name (including any former name):
Reason (eg resignation or removal):	Reason (eg resignation or removal):
Date of resignation or removal:	Date of resignation or removal:

Full name (including any former name):	Occupation
Full name (including any former name):	Occupation:
Usual residential address:	Nationality:
Email address:	
Date of election/appointment*:	Gender:
Full name (including any former name):	Occupation:
Usual residential address:	Nationality:
Email address:	
Date of election/appointment*:	Gender:
1. Change in details of any existing Committee In Drug Complete this section if there are any updates to Full name (including any former name):	
Usual residential address:	
Email address:	Nationality:
Date of election/appointment*:	Gender:
Full name (including any former name):	Occupation:
Usual residential address:	
Email address:	Nationality:
Date of election/appointment*:	Gender:
5. Changes in the articles/rules or constitution of	of association
A certified copy of the amended articles/rules or constitut	tion of the association must be attached to this form.
6. Applicant signatures	
	nowledge and belief that the information provided in this application is corre e members of the Committee making the application (eg if there are 6 members, it is
signed by at least 3 members).	e members of the committee making the application (eg if there are o members, it is
Full legal name of applicant*:	Full legal name of applicant*:
Signature:	Signature:
Date:///	Date://
Full legal name of applicant*:	Full legal name of applicant*:
Signature:	Signature:

Form 2 – Application for change of details of the Committee of a Charitable Association (continued)

9. Lodged by		
Name:	Other contact details:	
Address:	Telephone:	
	Email:	
10. Checklist		
The following must accompany this form:		
A certified copy of the amended articles/rules/constitution (which must also be attached if there is a change of name) which includes:		
The manner of appointment and removal of committee members;		

• The manner of disposal of assets on dissolution or cancellation of certification of incorporation.

The manner of changing the articles/rules/constitution;

The manner of dissolving the association;

Please deliver documents to Vanuatu Financial Services Commission, Companies House, Rue Bougainville, PMB 9023, Port Vila, Efate, Vanuatu