

MINUTES OF TRUSTEES' SPECIAL GENERAL MEETING

G & J Howgate Superannuation Fund

- At:** 1 Kilbirnie Close, Mount Eliza Vic 3930
On: 16 July 2021
- Present:** Mr Graham Howgate
G And J Howgate Super Pty Ltd
ACN: 616 884 201
- Chairperson:** Mr Graham Howgate
- Trusteeship:** The Company acts as trustee of the G & J Howgate Superannuation Fund.
- Minutes:** The Chairperson reported that the minutes of the previous meeting had been signed as a true and correct record.
- Business:** It had been brought to the Trustee's attention by the Accountant, Trentons CA, during the process of preparing the Fund's financial accounts for the financial year ended 30 Jun 2020 that the transfer of ownership of Imunexes shares purchased by the Fund did not eventuate
- Background:** August 2019 at a meeting between the Trustee and the Fund's then Financial Adviser, Stephen Bailey, it was suggested that the Fund should acquire additional Imunexus shares as part of the Fund's investment portfolio.
- The Trustee considered this as a good investment opportunity as the company is in a unique field hence most attractive for takeover bids and becoming a public listed company.
- The Trustee resolved unanimously that the Fund would proceed with acquiring the additional shares in Imunexus Ltd.
- 4 August 2019, payment of \$15,000 was made from the Fund's bank account for the purchase of 200,000 Ordinary shares in Imunexus Ltd.
- During this time, one of the member was subjected to a critical medical condition and was consequentially hospitalised for many weeks. Therefore, upon not receiving an ownership confirmation notice, neither Trustee had the capacity to follow up as the medical event was in the forefront of their minds.
- In December 2019 Stephen Bailey withdrew as the Fund's Financial Adviser due to serious health issues.
- In May 2021, it was brought to the Trustee' attention by the Accountant, Trentons CA, that the transfer of ownership for the purchase of shares in Imunexus Ltd to the Fund did not eventuate.
- On 9th June 2021, Trustee spoke with Stephen Bailey who assured the Trustee that the purchase of Imunexus shares were from a reliable previous client of his and he would rectify this issue as soon as practical.

On 28th June 2021, the Fund's current Financial Adviser, Mr David Ruthenberg agreed to follow up with Stephen Bailey as the Trustee was still waiting for confirmation of shares ownership transfer being completed.

On 6th July 2021, Trustee spoke with Stephen Bailey who provided Trustee with all the necessary documents for signing in order to complete shares ownership process.

On 16th July 2021, Trustee was still waiting for the transfer of shares ownership to be completed eventhough all necessary documents have been signed and forwarded back to Stephen Bailey.

It had been brought to the Trustee's attention that Stephen Bailey is recovering from an operation therefore the Trustee anticipates that the shares ownership transfer process is unlikely to be completed in the short term.

The Trustee resolved to continuously follow up with Stephen Bailey to ensure the shares ownership transfer process completed at the earliest.

All resolutions for this meeting were made in accordance with Regulation 4.08 of the *SIS Act* and Regulations.

There being no further business the meeting then closed.

Signed as a true and correct record.

Graham Howgate

Mr Graham Howgate
Chairperson

Macquarie withdrawal form

Macquarie Bank Limited ABN 46 008 583 542 AFSL 237502
 Macquarie Investment Management Limited ABN 66 002 867 003 AFSL 237492 RSEL L0001281



Please return this form by email to transact@macquarie.com or mail to Reply Paid 85744 Sydney NSW 2001.

1 Your account details – Funds will be debited from this account

Account number: Account name:

2 Your contact details – We may contact you to confirm this request before debiting your account

Phone number: Mobile number: *Howgate super fund*

3 Withdrawal details

Is this a full withdrawal? No, please specify **withdrawal amount** (fees may apply):
 Yes, please keep account open
 Yes, please close this account

! Note: If you close your Macquarie Cash Management Account (CMA), we will automatically close any linked Macquarie Online Trading Account (if there are no holdings) and/or any linked Macquarie Cash Management Accelerator Account(s). We cannot close your CMA if there are holdings in your linked Macquarie Online Trading account.

Select your withdrawal option: Overnight bank transfer OR Same day bank transfer (fees may apply) ► go to section 4
 Bank cheque (fees apply) ► go to section 5

4 Bank transfer

To nominated bank account (if only one on file) ► go to section 6 OR To account specified below

Account name:
 BSB number: Account number:
 Add as a nominated bank account, if not already

Optional reference OR Tax Office Reference (EFT Code) to appear on destination account (max 18 characters)

Optional narrative to appear on your statement (max 40 characters)

5 Bank cheque

| | |
|-------------|----|
| Payable to: | \$ |
| Payable to: | \$ |
| Payable to: | \$ |
| Payable to: | \$ |

Select receipt of cheque

Collection by (name) from office in Sydney Melbourne Brisbane
 on after 11.30am OR after 2.30pm

Mail Attention to:
 Address:

6 Signature

By completing this form, you accept and agree to be bound by the terms and conditions contained in the relevant Product Information Statement (as applicable to you and on the back of this form). If you do not already have a copy of the relevant offer document you can obtain it from our website at macquarie.com or by contacting us.

Signature

Date

Full name:

Signature

Date

Full name:

! This form must contain an original signature(s) – digitally inserted signatures will not be accepted. Please attach a copy of the account holder(s) driver's license or passport, if not already provided previously. The identification does not need to be certified.

Terms and conditions

1. Please check your account details carefully. It is your responsibility to ensure all payee account details are correct. Payments are processed using the BSB and account number provided, and with account names used as a reference only. Incorrect details may result in a loss of funds and we do not guarantee their recovery. We do not accept liability for funds unable to be recovered. Please confirm the correct account details with the payee.
2. Same day transfers may not be applicable for funds going to credit unions and building societies.
3. We normally do not provide any manual confirmations for transaction and account maintenance requests. Please check your transaction regularly via Macquarie Electronic Banking or on your statement.
4. For your Macquarie Cash Management Accelerator Account (Accelerator), please use this form only for account closure. To transfer funds between your Accelerator and CMA, please visit Macquarie Electronic Banking.

Lodgement times

| Withdrawal type | Sydney time (AEST) |
|-------------------------------------|---|
| Bank cheque requests | lodged by 9.00am: collect cheques after 11.30am |
| | lodged by 12 noon: collect cheques after 2.30pm |
| Bank transfer requests ¹ | 2.00pm |
| All other withdrawal requests | 12 noon |

¹ Bank transfers normally reach clients' accounts the following working day. Bank transfers (excluding BPAY[®]) to building societies and credit unions may take up to 48 hours. Clearance time on cheque deposits is three business days.

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! You can make free electronic funds transfers up to \$20,000 a day using Macquarie Electronic Banking. A \$10 fee applies for any withdrawal requests received by email or paper for less than or equal to \$20,000.

For more information, please visit help.macquarie.com or contact us using the below details:

Macquarie Cash: 1800 806 310

Macquarie Wrap: 1800 025 063

TRANSFER FORM FOR NON-MARKET TRANSACTIONS

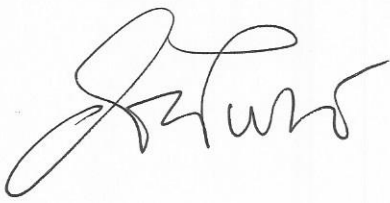
Use a **black pen**. Print in **CAPITAL** letters

1 Stamp Duty if applicable

| | | | | | | | |
|----|---|-------------------------------|----------------------------|---------------------------------|------------------------|-----|--|
| 2 | Full name of Company or Corporation | Immunexus Ltd. | | 3 | State of Incorporation | VIC | |
| 4 | Description of Securities (Shares, options etc.) | Class | If not fully paid, paid to | Register | | | |
| 6 | Quantity | Words | | Figures | | | |
| 7 | Full name/s of Transferor/s (Seller/s) | Given Name/s | Surname | For Company Use | | | |
| 7A | Securityholder Reference Number (<i>must be quoted</i>) | | | | | | |
| 8 | Consideration | \$15,000 | | Date of Purchase | | | |
| 10 | Full name/s of Transferee/s (Buyer/s) | Title | Given Name/s | Surname | | | |
| 10 | Securityholder Reference Number (if applicable) | | | | | | |
| 11 | Full postal address of Transferee/s (Buyer/s) | 1 Kilburnie Close Mt Eliza | | State/Country VIC Postcode 3930 | | | |

I / We the registered holder/s and undersigned seller/s for the above consideration do hereby transfer to the above name/s hereinafter called the Buyer/s the securities as specified above standing in my/our name/s in the books of the above named Company, subject to the several conditions on which I/We held the same at the time of signing hereof and I/We the Buyer/s do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed.

12 Transferor/s (Seller/s) sign here



14 Transferee/s (Buyer/s) sign here

X X

Do NOT use this form if you are transferring/buying/selling broker sponsored/CHESS held securities. You must contact your broker to perform this transaction.

- Chartered accountant (C.A)
- Barrister or solicitor or a clerk to a barrister and solicitor
- Australian Defence Force officer
- Commissioner for affidavits or declarations
- Legally qualified medical practitioner
- A Fellow of the Institute of Legal Executives (Victoria only)
- Diplomatic or consular officer
- Postmaster
- Notary public
- Member of the police force
- Minister of Parliament of the Commonwealth or the State Government
- Manager of a bank, building society or credit union
- Certified practicing accountant (C.P.A)
- Sheriff or a deputy sheriff
- Justice of the Peace
- Officer of the court-Magistrates, County or Supreme
- Pharmacist
- Marriage celebrant-civil or religious

SECTION B - SELLER DETAILS

1 Full name of Company, Corporation or Trust in which the securities are held: **HTH P/L (BAILEY INVESTMENT TRUST)**

2 Description of Securities (Fully Paid Ordinary Shares, Options, Notes, etc.): **Ordinary** 3 Security Code:

4 Number of Securities to be sold (quantity): **187500**

5 Full name/s of Transferor/s (Seller/s) as well as any designation (if applicable): **HTH P/L (BAILEY INVESTMENT TRUST)**

Note: This must match the proof of identity provided.

6 Transferor/s (Seller/s) Securityholder Reference Number (must be quoted): SRN:

7 Consideration - Is the full amount paid in settlement of the transfer of securities. Purchases should reflect the market price of securities as at the date of purchase. AUD \$ **15000** 8 Date of Purchase: Day / Month / Year

9 Sellers Contact Number: ~~STARR~~ **0412060025**

10 Sellers Email Address: **stare@bluecrestfinancial.com.au**

SECTION C - BUYER DETAILS

1 Full name/s of Transferee/s (Buyer/s) - A maximum of three joint holders. Securities may not be registered in the names of a firm or business name, an estate or deceased person, a minor, a fund or a trust. **ETS HOWGATE SUPER P/L ATN**
ETS HOWGATE SUPERFUND

2 Full address of Transferee/s (Buyer/s) **1 WILBIRNIE CLOSE**
Insert full address including the postcode. Only one address may be recorded: **MOUNT ELIZA**
VICTORIA 3930

3 Transferee/s (Buyer/s) Securityholder Reference Number (if known): SRN:

4 Buyers Contact Number: **0416860249**



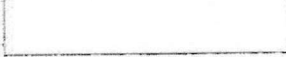
5 Buyers Email Address: **hongates@qa.net.au**

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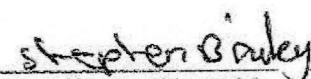
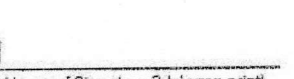
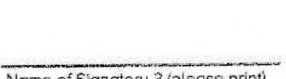
SECTION D – SIGN HERE

I/We the registered holder/s and undersigned seller/s for the above consideration do hereby transfer to the above name/s hereinafter called the Buyer/s the securities as specified above standing in my/our name/s in the books of the above named Company, subject to the several conditions on which I/We held the same as the time of signing hereof and I/We the Buyer/s do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable). To sign as power of attorney you must have already lodged it with the registry or your broker as appropriate or enclose a certified copy with this transfer.

1 Transferor/s (Seller/s) sign here

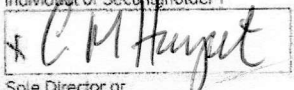
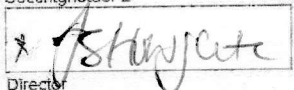
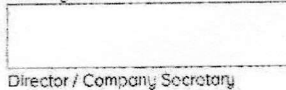
| | | |
|---|--|---|
| Individual or Securityholder 1  | Securityholder 2  | Securityholder 3  |
| Sole Director or Sole Director and Company Secretary (delete one) | Director | Director / Company Secretary |

2 Transferor/s (Seller/s) name of signatory here

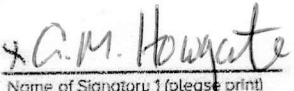
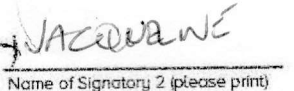
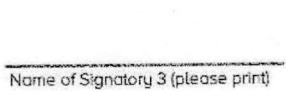
| | | |
|---|--|---|
|  |  |  |
| Name of Signatory 1 (please print) | Name of Signatory 2 (please print) | Name of Signatory 3 (please print) |

3 Date: / /

4 Buyer's sign here

| | | |
|---|--|---|
| Individual or Securityholder 1  | Securityholder 2  | Securityholder 3  |
| Sole Director or Sole Director and Company Secretary (delete one) | Director | Director / Company Secretary |

5 Buyer's name of signatory here

| | | |
|---|--|---|
|  |  |  |
| Name of Signatory 1 (please print) | Name of Signatory 2 (please print) | Name of Signatory 3 (please print) |

6 Date: / /

SECTION E – PAYMENT OF FEE

A fee of AUD \$55.00 (including GST) is payable. Where there is more than one off-market transfer with the same Seller(s) or Transferor(s) named, lodged at the same time (the registration name and address details must be an exact match) only one fee of AUD \$55.00 is payable. Otherwise, the fee is payable per off-market transfer lodged.

Option A: Cheque Please make the Cheque / Bank Cheque payable to *Automic Pty Ltd* in Australian Currency

Option B: Credit Card Visa Card or Master Card

Card Number:

Expiry Date: /

Name on card:

Signature of Card Holder:

CCV:

SECTION F – CHECKLIST

- Transfer form is fully completed, signed and dated.
- Certified copies of proof of identity from either Option 1 or Option 2 are provided



AUTON