

Registry: Brisbane  
Number: S 0820 of 2021

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The estate of: ANGELO FAENZA  
Late of: UNIT 1, 65 WHITEHAVEN WAY  
PELICAN WATERS, Queensland  
Date of death: 18 October 2020

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Grant of: **Probate of the Will (copy annexed)**

**Is granted to:**

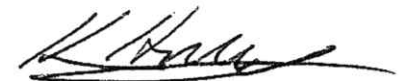
**Name:**  
ANTHONY ANDREW  
CAMPBELL

As executor

**Address:**  
16 BUNIMA COURT  
NGUNNAWAL, Australian Capital Territory



Given under the seal of the  
Supreme Court of Queensland



Registrar 29 JAN 2021

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GRANT OF PROBATE  
AND ADMINISTRATION JURISDICTION  
Prepared and filed in the registry.

GEOFF LYONS SOLICITORS PTY LTD  
2 CENTAUR STREET  
CALOUNDRA QLD 4551

**THIS IS THE LAST WILL AND TESTAMENT OF ME**

**ANGELO FAENZA** of Unit 1, 65 Whitehaven Way, Pelican Waters, Queensland.

- 1. I HEREBY REVOKE all former wills and other testamentary dispositions heretofore made by me.
- 2. I APPOINT my grandson **ANTHONY ANDREW CAMPBELL** ("ANTHONY") to be the executor and trustee of this will.
- 3. IF my said grandson refuses or is unable to act as the executor and trustee of this will then this clause of this will applies but otherwise does not apply.

I APPOINT my grandson **DAVID ADAM CAMPBELL** ("DAVID") to be the executor and trustee of this will.

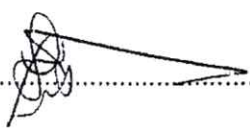
- 4. The executor/trustee or executors/trustees hereby appointed is/are hereinafter called "my trustee".
- 5. Subject to clause 6 hereof, I GIVE the whole of my estate as follows:-

to such of them my daughter **ANITA RENNIE** ("ANITA"), my said grandson **ANTHONY** and my said grandson **DAVID** as shall survive me for thirty (30) days and if more than one as tenants in common in equal shares.

- 6. IF any of **ANITA**, **ANTHONY** and **DAVID** shall predecease me, fail to survive me for thirty (30) days or die before attaining a vested interest in that share of my estate which would otherwise have been attained but leave a biological or adopted child or biological or adopted children who shall survive me for thirty (30) days such biological or adopted child or biological or adopted children shall take and if more than one as tenants in common in equal shares the share of my estate which his her or their parent would have otherwise taken under this will had such parent survived me for thirty (30) days and attained a vested interest in such share of my estate.
- 7. IN ADDITION to all other powers conferred upon a trustee by law I EMPOWER my trustee to sell all or any part of my estate and to distribute my estate as soon as possible.
- 8. I RELEASE my said daughter **ANITA** from any debt which she owes to me (together with all interest (if any) owing on any such debt) at the date of my death. All such debts are forgiven.
- 9. I have been advised of the ability to contract to make this will in a certain way and then not to change it or do anything to diminish the value of the promise. I have not agreed with anyone to make this will in a certain way.
- 10. Included in "any debt" in clause 8 is that debt owed to me by **ANITA** pursuant to Loan Agreement dated the 13<sup>th</sup> day of January 2016 between **ANITA** as Borrower and me as Lender and also included in "any debt" is that debt owed to me by **ANITA** as secured by registered Mortgage No. 717040586.

SHEET NO. 1


Testator.....

Witness.....

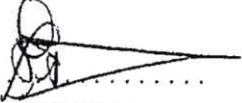
Witness.....

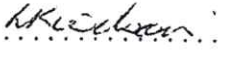
11. To ensure clarity, the debts owed to me by ANITA pursuant to such Loan Agreement and such Mortgage are forgiven and expunged.

IN WITNESS WHEREOF I have hereunto signed this 11<sup>th</sup> day of December 2019

  
\_\_\_\_\_  
Signature of Testator

Signed by the Testator in our presence and attested and signed by us in the presence of the Testator and each other.

Witness   
.....  
Full name Geoffrey Michael Lyons  
Occupation Solicitor  
Address 2 Centaur St  
Caloundra Q 4551

Witness   
.....  
Full name Leisa Karen Wilson  
Occupation Law Clerk  
Address 2 Centaur St  
Caloundra Q 4551

**Binding Death Benefit Nomination**

Nomination made by: **ANGELO FAENZA** of 1/65 Whitehaven Way, Pelican Waters, QLD, 4551

To: **FAENZA TRANSPORT NOMINEES PTY LIMITED** ("the Trustee") as trustee of the **FAENZA TRANSPORT PTY LTD STAFF SUPERANNUATION FUND** ("the Fund")

I **ANGELO FAENZA** hereby make a Binding Death Benefit Nomination ("Nomination") as follows:

1. In the event of my death, I hereby direct the Trustee to pay one hundred percent (100%) of any death benefit payable including any insurance policy payouts which are obtained by the Trustee of the Fund in respect of my membership of the Fund, to my **LEGAL PERSONAL REPRESENTATIVE/S** for distribution in accordance with the provisions of my Will.
2. This Binding Nomination is made pursuant to the provisions of the **FAENZA TRANSPORT PTY LTD STAFF SUPERANNUATION FUND TRUST DEED** originally made on 7<sup>th</sup> May, 1985 (and subsequently amended).
3. I hereby direct that this notice revokes any previous notice (binding or non-binding) I may have made in relation to my benefits in the Fund.
4. I acknowledge that unless amended or withdrawn earlier, this Nomination is binding on the Trustees for an indefinite term.
5. I acknowledge I can amend or revoke this Nomination at any time by lodging a new signed and dated Nomination to the Trustees.
6. In the event that this Nomination becomes non-binding for any reason I **DECLARE** that it is my desire that the Trustee of the Fund complies with the directions in clause 1 of this Nomination.
7. I have signed this Nomination in the presence of two witnesses (who are not a nominee on this Binding Death Benefit Nomination) both of whom are over the age of 18.

  
.....  
**ANGELO FAENZA**

DATE 03/09/2020

This Nomination was signed by the Member in our presence:

  
.....  
**WITNESS 1**

DATE 3/9/2020

g. Pockeloman  
.....  
**WITNESS 2**

DATE 3/9/2020

**Binding Death Benefit Nomination**

**Witness Declarations**

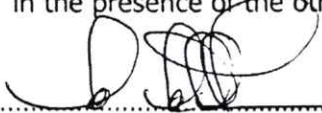
**Declaration of Witness 1:**

I, (print name of witness 1) MALCOLM DONALD McCOLM

Of (print address) c/- Level 4, 57 The Esplanade, Maroochydore, QLD, 4558

declare that:

- 1. I am a person over 18 years;
- 2. I am not a person mentioned in this Binding Death Benefit Nomination; and
- 3. **ANGELO FAENZA** signed this Binding Death Benefit Nomination in my presence and in the presence of the other witness.

.....  
  
 Signature of Witness 1

..... 3/9/2020 .....

**Declaration of Witness 2:**

I, (print name of witness 2) JODIE DAWN CHEESMAN

Of (print address) c/- Level 4, 57 The Esplanade, Maroochydore, QLD, 4558

declare that:

- 1. I am a person over 18 years;
- 2. I am not a person mentioned in this Binding Death Benefit Nomination; and
- 3. **ANGELO FAENZA** signed this Binding Death Benefit Nomination in my presence and in the presence of the other witness.

.....  
  
 Signature of Witness 2

..... 3/9/2020 .....

**FAENZA TRANSPORT NOMINEES PTY LIMITED ACN 068 765 668** as trustee of the **FAENZA TRANSPORT PTY LTD STAFF SUPERANNUATION FUND** hereby acknowledges receipt and accepts the within Binding Death Benefit Nomination.

DATED this 03/ day of SEPTEMBER 2020.

.....  
  
 Director