

**MINUTES OF MEETING OF TRUSTEES OF
McMullen Superannuation Fund**

Venue	5 Torquay Street Greenhills Beach NSW 2230
Date & Time	10-05-2007 11:00 AM
Present	Amanda Lois McMullen Kevin Paul Hurley
Chairperson	Amanda Lois McMullen

TABLED: Addition of the individual (s) associated with the superannuation fund and Draft updated Trust Deed & "Deed of variation of Superannuation Deed"

**RESOLVED BY ALL
PERSONS PRESENT
THAT :**

**Addition of
Trustee/Member** Kevin Paul Hurley
will be appointed as the new Director of Corporate Trustee
and Member of the McMullen Superannuation Fund.

**Amendment of the
fund's trust deed** To vary trust deed of McMullen Superannuation Fund by
executing a deed "Deed of Variation of Superannuation Fund
Deed of McMullen Superannuation Fund" and adapting the
tabled updated deed as per Annexure A of the "Deed of
Variation of Superannuation Fund Deed".

Notice to Members To give members of the fund, a "Notice to Members"
outlining the various amendments proposed to the existing
trust deed of the fund by handing a copy a "Deed of variation
of superannuation fund Deed of McMullen Superannuation
Fund" with Annexure A, that is a copy of the "new terms
(updated trust deed) of the fund's deed".

Application for Members

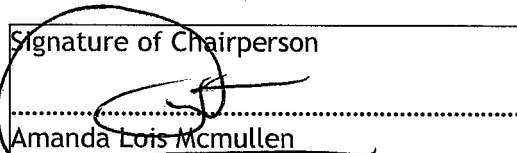
The application forms to become member(s) in the fund was received from following person(s)
Kevin Paul Hurley

is/are accepted and trustees will give member(s) details of the benefits provided under Rules of the this Fund.

Application to be regulated

To execute Change of details for Superannuation Entities form and other related documents to make the above-mentioned changes in the fund register.

There being no further matters to discuss, the meeting was closed.

Signature of Chairperson  Amanda Lois McMullen	Date 10 / 5 / 07
-------------------------------------------------------------------------------------------------------------------------------------------------	---------------------

Trustee Consent Form

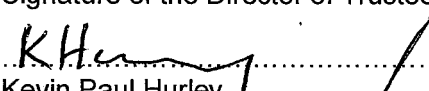
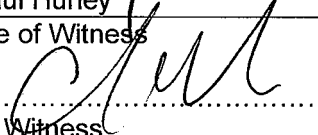
McMullen Superannuation Fund

I, Kevin Paul Hurley of 5 Torquay Street Greenhills Beach NSW 2230 consent to act as a Director of the Trustee Company.

I declare that :

- I have never been found guilty of a dishonest conduct offence in Australia or elsewhere.
- I am not a bankrupt and I have not, in the preceding 3 years from the date of this statement, entered into a deed of assignment or arrangement or a composition with my creditors under part X of the Bankruptcy Act.
- I am not, disqualified from acting as a trustee or as a responsible officer of a trustee company* under the Superannuation Industry (Supervision) Act.
- I understand my role & responsibility as a trustee of McMullen Superannuation Fund,
- I have read and understood the trust deed and the attached product disclosure statement and agree to abide to the trust deed and superannuation law.
- I agree to comply with the requirements of the Superannuation Industry (Supervision) Act 1993 (the SIS Act) and the Superannuation Industry (Supervision) Regulations 1994 (the SIS Regulations).
- I agree to comply, in all material respects, with the relevant requirements of the following provisions (to the extent applicable) of the SIS Act and the SIS Regulations. Sections: 17A, 35AE, 35B, 35C(2), 62, 65, 66, 67,67A, 67B, 82-85, 103, 104, 104A, 105, 109, 126K Regulations: 1.06(9A), 4.09, 4.09A, 5.03, 5.08, 6.17, 7.04, 8.02B, 13.12, 13.13, 13.14, 13.18AA

* If a company is acting as the trustee of the Fund, a receiver, or a receiver and manager, or an official manager, or a deputy official manager, or a provisional liquidator has not been appointed in respect of the company acting as trustee nor has it begun to be wound up.

Signature of the Director of Trustee Company  Kevin Paul Hurley	Date 10 / 5 / 07
Signature of Witness  Name of Witness TRACY MORESCHI	Date 10 / 5 / 07

McMullen Superannuation Fund Application for membership

With indicative death benefit nomination
No binding Death benefit nomination


(This Application Form must be inserted after the Product Disclosure Statement)

I hereby apply for membership of this fund as a member of this fund under the trust deed. I hereby make the following declarations as listed below:

- I have read and understood the trust deed, including all the terms relating to withdrawal of benefits payable in the deed, and the preceding Product Disclosure Statement (PDS),
- I have read the requirements of supplying my tax file number in the PDS, I hereby supply my tax file number to the trustee of this superannuation fund.
- I have read and understood the trust deed and Product Disclosure Statement and understand my role & responsibility as member and trustee of the fund.
- I am not in an employment relationship with [any other member/any other member except a relative of myself].
- I am not disqualified person, under superannuation law, from being trustee of the fund.
- I will, as member, abide by and comply with all requirements of the trust deed.
- I will fully and truthfully disclose any information relating to my membership of the fund that is required by the trustee, disclosing such information in writing as soon as is practicable upon such a request being made by the trustee, including:
 - If I have entered into an employment relationship with any other member of the fund who is not also a relative of myself, then any information about the circumstances leading to such a relationship
 - Any information about any circumstance (if any) that may disqualify me under superannuation law from being trustee of the fund.
 - Any information that relates to my medical condition, whether or not I have any medical problems.

Member details

Name	Kevin Paul Hurley
Address	5 Torquay Street Greenhills Beach NSW 2230
Place of Birth	Wales, United Kingdom
Date of birth	03-02-1970
Tax File Number	350356949


Kevin Paul Hurley

Dated..... 10/5/07

McMullen Superannuation Fund

Nomination of dependants

With indicative death benefit nomination

No binding Death benefit nomination

(This Application Form must be inserted after the Product Disclosure Statement)

Important information for completion

[This constitutes a direction to the trustee of the fund as to the manner of apportionment of any benefit from the fund that is payable upon your death; which direction is a non-binding death benefit notice in spite of the existence of which the trustee shall retain its discretion as to how to apply any benefit that is so payable upon your death.]

1. This nomination notice is not binding. The trustee/s will take it into account in the event that a benefit is paid from the fund on your death. However, the trustee/s has complete discretion as to which of your dependants and/or legal personal representative may receive the benefit and in what proportions. If there are no dependants or legal personal representative, the benefit may be payable to any other person. Your death benefit can be paid as a pension or a lump sum.

2. This nomination notice must be fully completed in accordance with the details below
 - the beneficiaries named in this notice must be dependants and/or your legal personal representative.
 - Your dependants are your spouse, de facto spouse and your children (including step, adopted and ex-nuptial children), and any other person financially dependent upon you at the time of your death.
 - Your legal personal representative is either the person named as your executor in your will; or, if you do not have a valid will at the date of your death, the person who, as your next of kin, applies for and has been granted letters of administration for your estate. Should you wish to nominate your legal personal representative, please write "legal personal representative" as the name of the beneficiary.
 - for each person nominated, you must provide both their relationships to you and the proportion of any benefit that is to be paid to each.

Nomination of beneficiaries / dependants

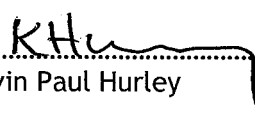
Name	Relationship to you	Proportion of benefit(%)
Estate of Kevin Hurley		100%

Member declaration

I, Kevin Paul Hurley of 5 Torquay Street Greenhills Beach NSW 2230 hereby direct the trustees that the [person/persons] named in the above table [are/is] to receive the proportions specified therein of any benefit that is payable upon my death from McMullen Superannuation Fund

I understand that

- in the event of my death, the trustees have complete discretion as to which of my dependants and/or estate will receive any death benefit payable.
- this notice revokes and amends any previous notice supplied to the trustee/s of the fund in regard to my nominated beneficiaries.

Signature of member  Kevin Paul Hurley	Date 10 / 5 / 07
---------------------------------------------------------------------------------------------------------------------------------	---------------------

ATO Self Managed Super Fund Trustee Declaration

I understand that as a director of the corporate trustee of McMullen Superannuation Fund, I am responsible for ensuring that the fund complies with the *Superannuation Industry (Supervision) Act 1993* (SISA) and other relevant legislation. The commissioner of taxation (the commissioner) has the authority and responsibility for administering the legislation and enforcing the fund's compliance with the law.

I must keep myself informed of changes to the legislation relevant to the operation of my fund and ensure the trust deed is kept up to date in accordance with the law and the needs of the members.

If I do not comply with the legislation, the Commissioner may take the following actions:

- impose administrative penalties on me
- give me a written direction to rectify any contraventions or undertake a course of education
- enter into agreements with me to rectify any contraventions of the legislation
- disqualify me from being a trustee or director of a corporate trustee of any superannuation fund in the future
- remove the fund's complying status, which may result in significant adverse tax consequences for the fund
- prosecute me under the law, which may result in fines or imprisonment.

SOLE PURPOSE

I understand it is my responsibility to ensure the fund is only maintained for the purpose of providing benefits to the members upon their retirement (or attainment of a certain age) or their beneficiaries if a member dies. I understand that I should regularly evaluate whether the fund continues to be the appropriate vehicle to meet this purpose.

TRUSTEE DUTIES

I understand that by law I must at all times:

- act honestly in all matters concerning the fund
- exercise skill, care and diligence in managing the fund
- act in the best interests of all the members of the fund
- ensure that members only access their super benefits if they have met a legitimate condition of release
- refrain from entering into transactions that circumvent restrictions on the payment of benefits
- ensure that my money and other assets are kept separate from the money and other assets of the fund
- take appropriate action to protect the fund's assets (for example, have sufficient evidence of the ownership of fund assets)
- refrain from entering into any contract or do anything that would prevent me from, or hinder me in, properly performing or exercising my functions or powers as a

trustee or director of the corporate trustee of the fund

- allow all members of the fund to have access to information and documents as required, including details about
 - the financial situation of the fund
 - the investments of the fund
 - the members' benefit entitlements.

I also understand that by law I must prepare, implement and regularly review an investment strategy having regard to all the circumstances of the fund, which include, but are not limited to:

- the risks associated with the fund's investments
- the likely return from investments, taking into account the fund's objectives and expected cash flow requirements
- investment diversity and the fund's exposure to risk due to inadequate diversification
- the liquidity of the fund's investments having regard to the fund's expected cash flow requirements in discharging its existing and prospective liabilities (including benefit payments)
- whether the trustees of the fund should hold insurance cover for one or more members of the fund.

Accepting contributions and paying benefits

I understand that I can only accept contributions and pay benefits (income streams or lump sums) to members or their beneficiaries when the conditions specified in the law and the fund trust deed have been met.

Investment restrictions

I understand that, as a director of the corporate trustee of the fund, subject to certain limited exceptions specified in the law, I am prohibited from:

- lending money of the fund to, or providing financial assistance to, a member of the fund or a member's relative (financial assistance means any assistance that improves the financial position of a person directly or indirectly, including the provision of credit)
- acquiring assets (other than business real property, listed securities, certain in-house assets and acquisitions made under mergers allowed by special determinations or acquisitions as a result of a breakdown of a relationship) for the fund from members or other related parties of the fund
- borrowing money (or maintaining an existing borrowing) on behalf of the fund except in certain limited circumstances (while limited recourse borrowing arrangements are permitted, they can be complex and particular conditions must be met to ensure that legal requirements are not breached)
- having more than 5% of the market value of the fund's total assets at the end of the income year as in-house assets (these are loans to, or investments in, related parties of the fund - including trusts - or assets subject to a lease or lease arrangement between the trustee and a member, relative or other related party)

- entering into investments that are not made or maintained on an arm's length (commercial) basis (this ensures the purchase or sale price of the fund's assets and any earnings from those assets reflects their market value).

Administration

I understand that the trustees of the fund must:

- keep and retain for at least 10 years
 - minutes of all trustee meetings at which matters affecting the fund were considered (this includes investment decisions and decisions to appoint members and trustees)
 - records of all changes of trustees, including directors of the corporate trustee
 - each trustee's consent to be appointed as a trustee of the fund or a director of the corporate trustee
 - all trustee declarations
 - copies of all reports given to members
- ensure that the following are prepared and retained for at least five years
 - an annual statement of the financial position of the fund
 - an annual operating statement
 - copies of all annual returns lodged
 - accounts and statements that accurately record and explain the transactions and financial position of the fund
- appoint an approved SMSF auditor each year, no later than 45 days before the due date for lodgment of the fund's annual return and provide documents to the auditor as requested
- lodge the fund's annual return, completed in its entirety, by the due date
- notify the ATO within 28 days of any changes to the
 - membership of the fund, or trustees or directors of the corporate trustee
 - name of the fund
 - contact person and their contact details
 - postal address, registered address or address for service of notices for the fund
- notify the ATO in writing within 28 days if the fund becomes an Australian Prudential Regulation Authority (APRA) regulated fund.

DECLARATION

By signing this declaration I acknowledge that I understand my duties and responsibilities as a director of the corporate trustee of the self-managed superannuation fund named on this declaration (or if the fund's name changes, that name). I understand that:

- I must ensure this document is retained for at least 10 years or while I remain a trustee or director of the corporate trustee (whichever is longer) and, if I fail to do this, penalties may apply
- I may have to make this document available for inspection by a member of staff of the ATO and, if I fail to do this, penalties may apply.
- I do not have access to the government's financial assistance program that is available to trustees of Australian Prudential Regulation Authority (APRA) regulated funds in the case of financial loss due to fraudulent conduct or theft.

Signature of the Director of Trustee Company Kevin Paul Hurley	Date 10 / 5 / 07
Signature of Witness Witness' name (witness must be over the age of 18 years)	Date 10 / 5 / 07

McMullen Superannuation Fund

Nomination of dependants

With indicative death benefit nomination

No binding Death benefit nomination

(This Application Form must be inserted after the Product Disclosure Statement)

Important information for completion

[This constitutes a direction to the trustee of the fund as to the manner of apportionment of any benefit from the fund that is payable upon your death; which direction is a non-binding death benefit notice in spite of the existence of which the trustee shall retain its discretion as to how to apply any benefit that is so payable upon your death.]

1. This nomination notice is not binding. The trustee/s will take it into account in the event that a benefit is paid from the fund on your death. However, the trustee/s has complete discretion as to which of your dependants and/or legal personal representative may receive the benefit and in what proportions. If there are no dependants or legal personal representative, the benefit may be payable to any other person. Your death benefit can be paid as a pension or a lump sum.

2. This nomination notice must be fully completed in accordance with the details below
 - the beneficiaries named in this notice must be dependants and/or your legal personal representative.
 - Your dependants are your spouse, de facto spouse and your children (including step, adopted and ex-nuptial children), and any other person financially dependent upon you at the time of your death.
 - Your legal personal representative is either the person named as your executor in your will, or, if you do not have a valid will at the date of your death, the person who, as your next of kin, applies for and has been granted letters of administration for your estate. Should you wish to nominate your legal personal representative, please write "legal personal representative" as the name of the beneficiary.
 - for each person nominated, you must provide both their relationships to you and the proportion of any benefit that is to be paid to each.

Nomination of beneficiaries / dependants

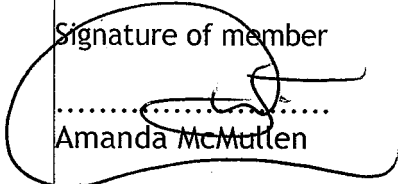
Name	Relationship to you	Proportion of benefit(%)
Estate of Amanda McMullen		100%

Member declaration

I, Amanda McMullen of 5 Torquay Street, Greenhills Beach NSW 2230 Australia hereby direct the trustees that the [person/persons] named in the above table [are/is] to receive the proportions specified therein of any benefit that is payable upon my death from McMullen Superannuation Fund.

I understand that

- in the event of my death, the trustees have complete discretion as to which of my dependants and/or estate will receive any death benefit payable.
- this notice revokes and amends any previous notice supplied to the trustees of the fund in regard to my nominated beneficiaries.

Signature of member  Amanda McMullen	Date 25 14 120.
---------------------------------------------------------------------------------------------------------------------------------------	--------------------