

## LEMARNE CORPORATION LIMITED

ABN 72 004 834 584

23 January 2004

The Manager  
Company Announcements Office  
Australian Stock Exchange Limited  
Level 4, 20 Bridge Street  
SYDNEY NSW 2000

**By eLodgement**

Dear Sir,

### **Compulsory acquisition of outstanding Lemvest shares completed**

We advise that following the successful takeover bid by Lemarne Corporation Limited (**Lemarne**) for all the issued shares in its subsidiary, Lemvest Limited (**Lemvest**) which closed on 19 December, 2003, Lemarne has compulsorily acquired all outstanding Lemvest shares. Lemarne is now the sole shareholder of Lemvest.

A copy of the claim form and letter to be sent by Lemvest to its former shareholders whose shares were compulsorily acquired in accordance with the Corporations Act is attached.

Yours faithfully

STEPHEN MASLIN  
COMPANY SECRETARY

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Please return completed form to:

Computershare Investor Services Pty Limited

GPO Box 52 Melbourne

Victoria 8060 Australia

Enquiries (within Australia) 1300 850 505

(outside Australia) 61 3 9615 5970

Facsimile 61 3 9473 2529

web.queries@computershare.com.au

www.computershare.com

27 January 2004

SAMPLE CUSTOMER  
SAMPLE STREET  
SAMPLE STREET  
SAMPLE STREET  
SAMPLE STREET  
SAMPLETOWN TAS 7000

Dear former Lemvest shareholder,

**Shares formerly held by you in Lemvest Limited**

We wish to advise that following the successful takeover bid (**Takeover Bid**) by Lemarne Corporation Limited (**Lemarne**) for all the issued shares in Lemvest Limited (**Lemvest**), your Lemvest shares have now been compulsorily acquired by Lemarne under the compulsory acquisition provisions of the Corporations Act 2001.

The consideration to which you are entitled (being 6 Lemarne shares for every 5 Lemvest shares formerly held by you) for the compulsory acquisition is being held by Lemvest on your behalf pending your instructions. This is the same consideration applicable to the Takeover Bid of Lemarne which ended on 19 December, 2003.


To claim the Lemarne shares now held on your behalf, please complete the enclosed claim form (**Claim Form**) and return it in the enclosed reply paid envelope. Once the Claim Form is returned, the Lemarne shares to which you are entitled will be transferred to you. Your uncertificated holding statement for those Lemarne shares will be forwarded to the address at the top of the Claim Form. If your address has changed, please cross out the current address and specify another address on the Claim Form.

If we do not receive any instructions from you regarding the Lemarne shares held by us on your behalf, that unclaimed consideration and any dividends declared by Lemarne in the meantime will ultimately be transferred to the Australian Securities and Investments Commission (**ASIC**). ASIC will sell or dispose of the Lemarne shares to which you are entitled and pay the proceeds into an unclaimed money amount. You will then be obliged to deal with ASIC to receive those moneys and any outstanding dividends.

We strongly encourage you to complete and return the Claim Form and claim your consideration as soon as possible but in any event by 12 March 2004. This will ensure that any dividend declared in respect of your Lemarne shares will be received by you direct rather than by us.

If you have any queries in relation to this process or your entitlements please call me on (03) 9820 2400.

Yours faithfully  
Lemvest Limited



Stephen L. Mason  
Company Secretary

**LEMVEST LIMITED ACN 006 697 703  
SHARE COMPULSORY ACQUISITION CLAIM FORM**

This form relates to the consideration to which you are entitled as a result of the compulsory acquisition of your ordinary shares in Lemvest Limited (**Lemvest**) by Lemarne Corporation Limited ACN 004 834 584 (**Lemarne**).

SAMPLE CUSTOMER  
SAMPLE STREET  
SAMPLE STREET  
SAMPLE STREET  
SAMPLE STREET  
SAMPLETOWN TAS 7000

<b>Number of Lemvest shares formerly held</b>

<b>Number of Lemarne shares to which you are entitled</b>

Please carefully read the instructions set out below to claim your consideration.

I/We, the undersigned, being the former holder(s) of the number of Lemvest shares shown above, hereby claim the Lemarne shares shown above as consideration for those Lemvest shares and instruct Lemvest to transfer at our risk the consideration (and any dividends declared in respect of those shares) to me/us at the address specified above. I/We agree to become a member of and be bound by the constitution of Lemarne.

<p>Holder 1</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>Director</p>	<p>Holder 2 (if joint)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>Director/Company Secretary</p>	<p>Holder 3 (if joint)</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div> <p>Sole Director and Sole Company Secretary</p>
<div style="border: 1px solid black; padding: 5px; display: inline-block;">             / / 2004           </div> <p>Date</p>		

**Instructions:**

Please sign and date this Claim Form where indicated above. This Claim Form should be signed in accordance with the procedure set out below:

- (a) **Individuals** – Individuals must sign the Claim Form personally unless they follow the power of attorney procedure outlined below.
- (b) **Joint holdings** – In the case of joint holders, all must sign this Claim Form.
- (c) **Companies** – This Claim Form must be signed by either 2 directors or a director and a company secretary. Alternatively, where the company has a sole director and, pursuant to the Corporations Act, there is no company secretary, or where the sole director is also the sole company secretary, that director may sign alone. Delete titles as applicable.
- (d) **Power of attorney** – If this Claim Form is signed under a power of attorney, the attorney declares that the attorney has no notice of revocation of this power. If not already noted by the Lemvest registry, a copy of the power of attorney must accompany this Claim Form when you return it.

- (e) **Deceased estates** – This Claim Form must be signed by all the legal personal representatives of the deceased estate and, if not already noted by the Lemvest registry, a certified copy of the probate or letters of administration must accompany this Claim Form when you return it.

**Returning this Claim Form** – Please return as soon as possible this Claim Form (properly completed, signed and dated) and any other documents required by these instructions to Computershare Investor Services Pty Limited in the enclosed reply paid envelope or to GPO Box 52, Melbourne VIC 8060.

**Queries** – If you have any queries in relation to this Claim Form or in relation to the compulsory acquisition of the Lemvest shares formerly held by you, please call (03) 9820 2400.

**Your daytime contact number** - Please provide a telephone number so we can contact you if necessary:

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**THIS DOCUMENT IS IMPORTANT AND REQUIRES YOUR IMMEDIATE ATTENTION.**

If you have any doubt as to how to act, you should consult your financial or legal adviser.