

642(1)(b)

Return of alteration in the directors or secretary of a Part XXIII company or in their particulars

TUESDAY



JNI 16/10/2012 #109 COMPANIES HOUSE

Photocopies of this form will not be accepted

Please use upper and/or lower case letters exactly as you intend them to appear in Company name in Black Ink. Please leave a blank box to indicate a space.

Company number (e.g. FC 099999):

NF 000310

Company name (in full):

AVIVA INSURANCE LIMITED

Please complete all remaining boxes on this form legibly, in CAPITAL LETTERS and in Black Ink. Please leave a blank box to indicate a space. Use a separate row for each address line. Please do not fold this form.

Appointment

Date of appointment (DD/MM/YYYY):

(Turn over page for resignation and change of particulars.)

Appointment of director

Appointment of secretary

Please mark the appropriate box. If the appointment is as director and secretary mark both boxes.

Title:

* See Note 1

Forenames *:

Surname:

* See Note 1

Previous name *:

Usual residential address:

Address Line 1

Address Line 2

Post town

County/region

Postcode:

Country:

