



Termination of a Director Appointment

Company Name: **CNA INSURANCE COMPANY LIMITED**

Company Number: **00000950**



Received for filing in Electronic Format on the: **06/03/2020**

X90A2OUH

Termination Details

Date of termination: **25/02/2020**

Name: **MR JAMES MICHAEL ANDERSON**

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Liquidator, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.