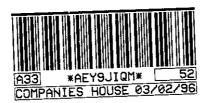
## THE SECRETARIAT



## 288

## Change of director or secretary or change of particulars.

İ						
Company number	CN 6252  General Accident Executor and Trustee Company Limited					
Company name						
Appointment	Day Month Year					
(Turn to Date of appointment next page	DA 24 01 96					
for resign- Appointment of director ation and	CD X					
change of Appointment of secretary parti-	CS					
culars) Name *Style/Title	Mr					
Forenames	Russell					
Surname	Evans					
*Honours etc						
Previous forenames						
Previous surname						
Usual residential address	AD Flat2					
	40 Tay Street					
Post town	PERTH					
County/Region						
Postcode	PH1 5TR Country					
Date of birth+	DO 15 02 39 Nationality+ NA New Zealand					
Business occupation+	OC Insurance Manager					
Other directorships+	None					
	I consent to act as director of the above named company					
Consent signature	Signed Molomo Date 31-1-96					

\*Voluntary details +Directors only

## Resignation

(This includes any form of ceasing to hold office eg death or removal from

office)

Date of resignation etc

Resignation as director

Resignation as secretary

Forenames

Surname

Date of birth (directors only)

If cessation is other than resignation, please state reason (eg death)

Change of particulars

Date of change of particulars Change of particulars, as director Change of particulars,

Surname

Forenames | (name previously notified to Companies House)

as secretary

Date of birth (directors only)

Change of name (enter new name) **Forenames** 

Surname

Change of usual residential address (enter new address)

Post town

County/region

Postcode

Signature

Other change

(please specify)

After signing, please return the form to the Registrar of Companies at Companies House, Crown Way Cardiff CF4 3UZ for companies registered in England and Wales, or Companies House 100-102 George Street Edinburgh EH2 3DJ for companies registered in Scotland

To whom should Companies House direct any enquiries about the information on this form?

DR XD XS DO

DE TOTAL	
ZD	
ZS	
DO DO	•
NN	_
	•
AD	
	-
	_
	-
Country	
	\

A serving director, secretary etc must sign the form below.

	A	$\sim$ 1				31/1/10	la.
Signe					Date	2.(1.1.)	
(by a	servi	ng di	rector/	secret	ary/	a <del>dmini</del>	strator
			eceiver,				•
			priate) <sup>°</sup>				

R A Whitaker General Accident Fire and Life Assurance Corporation plc, Pitheavlis **PERTH** PH2 ONH Scotland

Tel: