



A1K0S1K.

A01 RECEIPT DATE: 26/05/94

288

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

This form should be completed in black

Company number

CN 37038



Company name

THE EQUITABLE LIFE ASSURANCE SOCIETY

Appointment

(Turn to
following
page for
resignation
and change
of particulars).

Date of appointment

Appointment of director

Appointment of secretary

Name * Style/Title

Forenames

Surname

* Honours etc

Previous forenames

Previous surname

Usual residential address

Post town

County/Region

Postcode

Country

Date of birth †

Business occupation †

Other directorships †

Day Month Year
DA

CD

CS

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

AD

DO

OC

Nationality † NA

I consent to act as director/secretary of the above named company

Consent signature

Signed

Date

* Voluntary details

† Directors only

A serving director etc must also sign the form following.

Resignation

(This includes any form of ceasing to hold office e.g. death or removal from office.)

Date of resignation etc

Resignation etc, as director

Resignation etc, as secretary

Forenames

Surname

Date of birth (directors only)

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

Change of particulars

Complete this section in all cases where particulars have changed and then the appropriate section below.

Date of change of particulars

Change of particulars, as director

Change of particulars, as secretary

Forenames (name previously notified to Companies House)
Surname

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

Other change

(please specify)

DR 1 8 0 5 9 4

XD X

XS

Please mark the appropriate box.

If resignation etc is as a director and secretary mark both boxes.

EDWARD BARRY ORTON

SHERLOCK

DO 1 0 0 2 3 2

RETIREMENT

DC

ZD

ZS

Please mark the appropriate box.

If change of particulars is as a director and secretary mark both boxes.

DO

NN

AD

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

Signature

Signed

Date

(by a serving director/secretary/administrator/administrative receiver/receiver). (Delete as appropriate)

Companies House, Crown Way, Cardiff CF4 3UZ
for companies registered in England and Wales

Companies House, 100-102 George Street, Edinburgh EH2 3DJ
for companies registered in Scotland.

P W WILMOT ESQ

THE EQUITABLE LIFE ASSURANCE SOCIETY

WALTON STREET

AYLESBURY

BUCKS HP21 7QW

After signing please return the form to the Registrar of Companies at

or

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