

Please complete in typescript, or in bold black capitals

288b

Resignation of director or secretary

	Company Number	99122
Company Name in full		Norwich Union Insurance Limited
* F288BD40 *		
Resignation	n	
form		Day Month Year
	Date of resignation	16 06 97
	Resignation as director	X as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
Please insert details as previously notified to Companies Ho	NAME *Style / Title	Mr *Honours etc DL
	Forename(s)	George William
	Surname	Paul
lf ces resigr	† Date of Birth sation is other than nation, please state reason	Day Month Year 25 02 40
		A serving director, secretary etc must sign the form below.
* Voluntary details. † Directors only.	Signed	ella Ceux Date 19 June 1997
(by		(by a serving director / secretary / administrator / administrator / administrator / receiver manager / receiver
telephone num a DX number	e name, address	M D Oxbury
	nber and, if available, and exchange of mpanies House should e is any query	Norwich Union Insurance Group 8 Surrey Street
		NORWICH NR1 3NG Tel (01603) 622200
		DX number DX exchange
A01 *A65WYX3F* 131 COMPANIES HOUSE 04/07/97		When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh