

**Company Number** 

Please complete in typescript, or in bold black capitals

## 288b

## **RESIGNATION** of director or secretary (NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

Company Name in full		General Accident Life Assurance Limited							
* F288	8BD40 *								
Resignation form	1		Day	Month	Year				
	Date	e of resignation	11	05	98				
Resignation as director			X	X as secretary Please mark the is as a director.				e appropriate box. If resignati and secretary mark both boxe	
Please insert details as previously notified to Companies Ho	NAME	*Style / Title	RT HON				*Honours etc PC, OSTJ		
		Forename(s)	LORD IAN BRUCE						
	ouse.	Surname	LANG O	F MONKT	ON				
			Day	Month	Year	1			
†Date of Birth			27	06	40				
	essation is c gnation, ple	other than ase state reason							
			A serviı	ng direc	tor, secr	etary etc m	ust sign the for	m below.	
* Voluntary detail † Directors only.	ls.	Signed			Ce		Date	15/5/98	
			(by a servir	ng director	secretary /	administrator / a	administrative receiver	/ receiver manager / receiver)	
Please give the telephone num a DX number the person Co	nber and, if and Exchan	available, ige of	P M WHIT	E, GENERAI	_ ACCIDENT	PLC, PITHEAVLIS	, PERTH, PH2 ONH		

226742

\*ADIXTEBN\* OMPANIES HOUSE 19/05/98

contact if there is any query.

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

DX exchange

Tel 01738 895328

DX number

for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland DX 235 Edinburgh