

Please complete in typescript, or in bold black capitals.

288c

CHANGE OF PARTICULARS for director

or secretary(NOT for appointment (use Form

CHWP000		288a) or resignation (use Form 288b))		
	Company Number	879931		
Company Name in full		GENAVCO INSURANCE LIMITED		
			Day Month	Year
Changes of particulars	Complete in all cases	Date of change of particulars	Day Month 2 6 0 3	2,0,0,4
form	Name *Style / Title	MR	*Honours etc	,, <u>,,</u>
	Forename(s)	MALCOLM JAMES		
	Surname	MCCLYMONT		
	·	Day Month Year		· · · · · · · · · · · · · · · · · · ·
	† Date of Birth	0,20,3 1,95,9		
change of name (enter new name) Forename(s)				
	Surname			
hange of usual r	esidential address ++	9 1/11000	// 0 (5	
nter new address)		9 VICARS	CLOSE	
Tick this box if the	Post town	ENFIELD_		
ddress shown is a ervice address for the beneficiary of a onfidentiality Order ranted under the rovisions of section	County / Region	MIDDLESEX	Postcode	EN1 3DW
	Country	ENGLAND		
23B of the ompanies Act 1985	Other change (please specify)			
	(,	A serving director, secretary etc must sign the form below.		
Voluntary details.	Signed	M. J. McClymont	Date	14/4/2004
*Delete as appropriate.		(** director / secretary / administrator / adr	ninistrative receiver / rec	ceiver manager / receiver)
nformation in the	to give any contact box opposite but if you panies House to contact			
ou if there is a q	uery on the form. The			
contact information that you give will be risible to searchers of the public record		Tel		
	•	DX number DX	K exchange	
		When you have completed and Registrar of Companies at:	signed the form r	please send it to the

7 **COMPANIES HOUSE** 15/04/04 Form April 2002

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Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

or LP - 4 Edinburgh 2