

Please complete in typescript, or in bold black capitals

CHFP029

288b

Terminating appointment as director or secretary (NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

	1		
Cor	mpany Number	1132760	
Company Name in full		LLOYDS TSB LIFE ASSURANCE COMPANY LIMITED	
Date of termination of appointment as director		Day Month Year	
		0 7 0 8 2 0 0 2 as secretary X	Please mark the appropriate box. If terminating appointment as a director and secretary mark both boxes.
NAME Please insert details as previously notified to Companies House.	*Style / Title	MISS	*Honours etc
	Forename(s)	ANN BARRIE	
	Surname	SIMMONS	
	†Date of Birth	Day Month Year	
* Voluntary details. † Directors only. ** Delete as appropriate	Signed	A serving director, secretary etc	must sign the form below. Date 9. 8.の
		(** serving director / secretary / administrator / adm	inistrative receiver / receiver manager / receiver)
Please give the name, telephone number and a DX number and Exch	, if available,	MS TRACEY NICHOLLS, 69 MORRISON STREET, I	EDINBURGH, EH3 8YF
the person Companies House should -contact if there is any query.		Tel 0131 655 3247	
		DX number DX	(exchange
		When you have completed and signed the form please send it to the Registrar of Companies at:	

Companies House, Crown Way, Cardiff, CF14 3UZ

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in England and Wales

for companies registered in Scotland

16/08/02

COMPANIES HOUSE

THE FEVINEU TOOS

DX 33050 Cardiff

DX 235 Edinburgh