

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))

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C	_	•	\mathbf{r}	•	•	•

CHFP029							
O	Company Number	1132760					
C	Company Name in full	LLOYDS TSB LIFE ASSURANCE COMPANY LIMITED					
Resignatio	n						
form	11	Day Month	⁄ear				
	Date of resignation	0 4 0 2 2					
	Resignation as director	X as	secretary	Please mark the is as a director of	appropriate box. If resignati and secretary mark both boxe		
Please insert	NAME *Style / Title	MR.		*Honours etc			
details as previously	Forename(s)	DENNIS JAMES					
notified to Companies Ho	use. Surname	STACEY			No.		
		Day Month	/ear				
	†Date of Birth	2 5 0 1 1 9 5 0					
	ssation is other than mation, please state reason						
		A serving directo	r, secretary etc	must sign the for	m below.		
Voluntary details. Directors only. Delete as approp	Oigilou	Sai la	mel	Date	4/2/2		
		(** serving director / secret	ary / administrator / adr	ninistrative receiver / receive	er manager / receiver)		
Please give the name, address, elephone number and, if available, a DX number and Exchange of he person Companies House should contact if there is any query.		MS. S.N. O'CONNOR, 71 LOMBARD STREET, LONDON, EC3P 3BS					
		Tel 020 7 356 1034					
		DX number		X exchange			
	nn 53 n 5 nn 5nn 513nb i 3n 53nn3 n 5n 133 n	When you have congressive Registrar of Comp	ompleted and signanies at:	gned the form pleas	se send it to the		

Companies House, Crown Way, Cardiff, CF4 3UZ
for companies registered in England and Wales
or
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 33050 Cardiff

DX 235 Edinburgh

COMPANIES HOUSE Form revised July 1998 14/02/00