

Please complete in typescript, or in bold black capitals

Form revised March 1995

288c

CHANGE OF PARTICULARS for director or secretary (NOT for appointment (use Form 288a) or resignation (use Form 288b))

(Company Number	2123239	, ,			
Com	pany Name in full	AMBASSADOR INSURANCE COMPANY LIMITED				
* F288CD	40 *		Day	Month	Year	
Changes of	Complete in all cases	Date of change of particulars	16	01	99	
particulars form	Name *Style / Title	MS		*Honours	etc	
	Forename(s)	SHARON NOELLE				
	Surname	O'CONNOR				
	† Date of Birth	Day Month Year				
Change of name (enter new name)	Forename(s)					
	Surname					
Change of usual r (enter new address)	esidential address	176 BLAGDON ROAD				
	Post town	NEW MALDEN				
	County / Region	SURREY		Postco	ode K	T3 4AL
	Country	ENGLAND				
Other change	(please specify)					
		A serving director, secretary	etc mu	st sign th	e form	below.
* Voluntary details. † Directors only.	Signed			Dat		18-1-99
Please give the nar	and, if available,	(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver) MS, S.N. O'CONNOR, 71 LOMBARD STREET, LONDON, EC3P 3BS				
a DX number and Exchange of the person Companies House should contact if there is any query.		Tel				
AZ4 *A7R COMPANIES H	ISD4I* 716 DUSE 19/01/99	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, CF4 3UZ for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh				