

Please complete in typescript, or in bold black capitals

Form revised March 1995

288b

DX 235 Edinburgh

Resignation of director or secretary

	Company Number	er 2129	2129286						
	Company Name in fu	ıll St S	Stephen's	Polic	ies Limite	ed			
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orm			Month	Year	7				
	Date of resignation	23	12	96					
	rχ	X as secretary Please mark the appropriate box. If resignati is as a director and secretary mark both box							
	NAME *Style / Titl	e Mr	Mr *Honou				CCA		
Please insert details as previously notified to Companies Ho	Forename(s	Geof	Geoffrey						
	Surname	Load	Loades						
		Day	Month	Year	_				
	† Date of Birtl	h 03	09	42					
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	name, address	M D	0xbury		/				
elephone number and, if available, DX number and exchange of			Norwich Union Insurance Group 8 Surrey Street						
e person Com ntact if there	panies House should is any query		NORWICH NR1 3NG Tel (01603) 622200						
		DX nu			DX exchange				
	AQQKES7N* 193 S HOUSE 09/01/97	Registra Compar for com	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 for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB						

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

for companies registered in Scotland