

Resignation of director or secretary

Please complete in typescript, or in bold black capitals.

	2199286						
Company Name in full		DIRECT LINE LIFE INSURANCE COMPANY LIMITED					
F288BE60							
Resignatior form		Day	Month	Year			
	Date of resignation Resignation as director	22 X	o7 as secret	1997 ary	Please mark the app		ox. If resignation is as both boxes
J	NAME *Style/Title	MR			*Honours etc		
Please insert deta	ils Forename(s)	JOHN HOWARD					
s previously otified to Companies House	Surname .	WEBB					
·	t Date of Birth	Day 04	Month 01	Year 1934			
resignation	, please state reason						
Voluntary details. Directors only.	A serving director, secretary etc must sign the form below. Date 3,/7/97						
lease give the elephone number and erson Companiontact if there is	(by a serving director/secretary/administrator/administrative receiver/receiver manager/receiver) 3 EDRIDGE ROAD, CROYDON, SURREY, CR9 1AG Tel DX number DX exchange						
A16 *AMI	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 for companies registered in Scotland DX 235 Edinburgh						