

## Resignation of director or secretary

Please complete in typescript, or in bold black capitals.

, ,,, bola black cap					· ·
Company Number		2199286			
Company Name in full		DIRECT LINE LIFE INSURANCE COMPANY LIMITED			
*F288B	<b>E 60</b> *				
Resignation		Day	Month	Year	
orm	Date of resignation	31	07	1997	
F	esignation as director	х	às secre	tary	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes
, NA	AME *Style/Title	MR			*Honours etc
رزي. Please insert detai	Forename(s)	JOHN NAPIER			
s previously otified to	Surname	ALLAN			
Companies House.		Day	Month	Year	1
	t Date of Birth	1.1	03	1947	
If cessation resignation,					
		A seryinç	g director,	secretar	y etc must sign the form below.
Voluntary details. Directors only.	Signed	Loma	H. K	Dez	Date 4/9/97
Directors of the		(by a serving director/secretary/administrator/administrative receiver/receiver manager/receiver)			
	he name, address,	3 EDRIDGE ROAD, CROYDON, SURREY, CR9 1AG			
Please give the elephone number					
erson Companie		Tel			
contact if there is a	ny query.	DX number DX exchange			
	When you have completed and signed the form please send it to the				

COMPANIES HOUSE 08/09/97

Registrar of Companies at: DX 33050 Cardiff

Companies House, Crown Way, Cardiff, CF4 3UZ

for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for companies registered in Scotland