

Appointment of director or secretary

Company Number 2413321

Company Name in full AUTOMOBILE ASSOCIATION INSURANCE SERVICES HOLDINGS LIMITED



* F 2 8 8 A C 5 0 *

Date of Day Month Year
15 01 96

† Date of birth Day Month Year
09 01 54

Appointment Form

Appointment as director



as secretary



Please mark the appropriate box. If appointment is as a director and secretary mark both boxes.

NAME *Style / Title

Director

*Honours etc

BA(Hons) FCIB
MCIM DipM

Forename(s)

Barry Duncan

Surname

SMITH

Previous Forename(s)

N/A

Previous Surname

N/A

Usual residential address

"Churston"

2 Redcourt

Pyrford

Post town

Woking

Postcode

GU22 8RA

County / Region

Surrey

Country

England

† **Nationality**

British

† **Business occupation**

Director Operations
AAIS

† **Other directorships**

AUTOMOBILE ASSOCIATION INSURANCE
SERVICES LIMITED

I consent to act as ** director / secretary of the above named company

Consent Signature

Date

19.01.96

* Voluntary details.

† Directors only.

** Please delete as appropriate

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query.

Signed

A director, secretary etc must sign the form below.

Date

19.1.96

(*a director / secretary / administrator / administrative receiver / receiver manager / receiver)

Colin Skeen
Secretary
Norfolk House
Priestley Road
BASINGSTOKE
Hampshire RG24 9NY



A31 *AGMH7IHZ* 188
COMPANIES HOUSE 25/01/96

When you have completed and signed the form please send it to
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**