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Termination of Appointment of a Director or Secretary

Company Name: INDEMNITY INSURANCE LIMITED

Company Number: **02445040**

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Resignation Details

Position: **DIRECTOR** Date of Resignation: **05/01/2006**

Name: MR BERNARD HIGGINS Date of Birth: 12/12/1960

Authorisation

Authoriser Designation: SECRETARY Date Authorised: 23/03/2006 Authenticated: Yes (E/W)