



## Appointment of Director

Company Name: **ST ANDREW'S INSURANCE PLC**

Company Number: **03104671**



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### New Appointment Details

Date of Appointment: **01/03/2024**

Name: **MRS KIRSTINE ANN COOPER**

The company confirms that the person named has consented to act as a director.

Service Address: **25 GRESHAM STREET  
LONDON  
UNITED KINGDOM  
EC2V 7HN**

Country/State Usually Resident: **UNITED KINGDOM**

Date of Birth: **\*\*/08/1964**

Nationality: **BRITISH**

Occupation: **COMPANY DIRECTOR**

## **Authorisation**

### **Authenticated**

**This form was authorised by one of the following:**

**Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor**