

## **Appointment of Director**

Company Name: **FIL Life Insurance Limited** 

Company Number: 03406905

Received for filing in Electronic Format on the: 21/12/2023

## **New Appointment Details**

Date of Appointment: 19/12/2023

MR JAMES DAVID CARTER Name:

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

Service address recorded as Company's registered office

Country/State Usually

**UNITED KINGDOM** 

Resident:

Date of Birth: \*\*/05/1978

Nationality: **BRITISH** 

Occupation: DIRECTOR

## Authorisation

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