Company number (e.g. FC 099999):

642(1)(b) Return of alteration in the directors or secretary of a Part XXIII company or in their particulars



16/10/2012 **COMPANIES HOUSE**

Photocopies of this form will not be accepted

Please use upper and/or lower case lellers exactly as you inlend them in Company Please leav box to i.

Please co remaining this form CAPITAL L and in E ~lease leav box to i spa ≥eparat , ach addi riesse do

(Turn ove resign pa

Please appropriate b appoint director and mark bo

Post lown

Postcode:

Country:

County/region

s exactly as you I them to appear mpany name in	NF 000159														
Black Ink. e leave a blank	Company name (in full):														
ox to indicate a space.	AVIVA INTERNATIONAL INSURANCE														
ese complete all aining boxes on s form legibly, in ITAL LETTERS	LIMILED														
nd in Black Ink. e leave a blank															
ox to Indicate a space. Use a eparate row for h address line.	Appointment														
ase do not fold this form.	Date of appointment (DD/MM/YYYY):														
rn over page for resignation and															
change of particulars.)	Appointment of director														
Please mark the priate box. If the	Appointment of secretary														
opointment is as or and secretary tark both boxes.	Title:														
idik botti boxes.															
* See Note 1	Forenames *:														
	Surname:														
* See Note 1	Previous name *:														
	Usual residential address:														
Address Line 1															
Address Line 2															

	Appointment (continued)
Please complete all	Date of birth † (DD/MM/YYYY):
remaining boxes on this form legibly, in	
CAPITAL LETTERS and in Black ink.	Nationality †:
Please leave a blank box to indicate a space. Use a	
separate row for each address line.	Projects and continue to
Please do not fold this form.	Business occupation †:
	Other directorships †:
	Yes No
‡ See Note 2	Other directorships detail ‡:
	Consent signature
	Signed: Date (DD/MM/YYYY):
	A serving director etc. must also sign the form on page 4
(This includes any form of ceasing to	Resignation
hold office e.g. death or removal from office.)	Date of resignation (DD/MM/YYYY):
United.y	08082007
Please mark the	Resignation etc. as director
appropriate box. If resignation etc. is as director and secretary	Resignation etc. as secretary
mark both boxes.	Forenames *:
* See Note 1	RICHARD ANDREW
	Surname:
	WHITAKER
	Date of birth † (DD/MM/YYYY):
	13 03 19512
	If cessation is other than resignation please state reason (e.g. death):
A M4	
† Directors only	

Complete this section in all cases where particulars have changed and then the appropriate section below, i.e. Change of name. Please mark the appropriate box. If change of particulars etc. is as director and secretary mark both boxes. See Note 1 Names previously notified to Companies	Change of Particulars Date of change of particulars (DD/MM/YYYY): Change of particulars as director Change of particulars as secretary Forenames *: Surname:	542(1)(b) Page 3
Registry.		
(2-12-2-12-2-12-12-12-12-12-12-12-12-12-1	Date of birth † (DD/MM/YYYY):	
(enter new name). * See Note 1	Change of name: Forenames *:	
GEC HOLD !	rotenames .	
	Surname:	
सत्त.er new address).	Change of usual residential address:	
Address Line 1		
Address Line 2		
Post town		
County/region		
Please complete all remaining boxes on this form legibly, in CAPITAL LETTERS and in Black Ink. Please leave a blank box to indicate a space. Use a leparate row for each address line. Please do not fold this form.	Postcode: Country:	

Change of Particulars (continued)

Please complete all remaining boxes on this form legibly, in CAPITAL LETTERS and in Black Ink. Please leave a blank box to indicate a space, Use a separate row for each address line. Please do not fold this form.

Other change (please specify):		
A serving director/secretary etc. must also sign the form below		.۔. لـ
Counter signature A serving director/secretary etc. must also sign the form below Signed:	Date (DD/MM/YYYY):	
(by a serving directer/secretary/administrator/administrative receiver). (Delete as appropriate)		

After signing please return the form to: Companies Registry 1st Floor, Waterfront Plaza 8 Laganbank Road Belfast BT1 3LX

To whom should Companies Registry direct any enquiries about the	Co	Contact name:																															
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Notes

1. Show all full forenames, NOT INITIALS, if the director or secretary is a Corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential address line.

Give previous forenames or surname except:

- for a married woman the name before marriage need not be given.
- for names not used since the age of 18 or for at least 20
- A peer or an individual known by a title may state the title instead of or in addition to the forenames and surname.

2. In the case of an individual who has no business occupation but holds other directorships, give particulars of them.

Give the name of every company of which the person concerned is a director or has been a director at any time in the past 5 years. Exclude any company which either is, or at any time during the past 5 years when the person was a director, was

- dormant
- a parent company which wholly owned the company making the return
- a wholly subsidiary of the company making the return
- another wholly owned subsidiery of the same parent company.