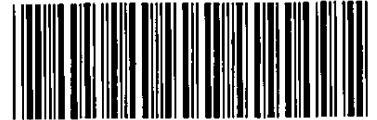


642(1)(b)

Return of alteration in the  
directors or secretary of a Part  
XXIII company or in their  
particulars

TUESDAY



JNI 16/10/2012 #105  
COMPANIES HOUSE

Photocopies of this form  
will not be accepted

Please use upper  
and/or lower case  
letters exactly as you  
intend them to appear  
in Company name in  
Black Ink.  
Please leave a blank  
box to indicate a  
space.

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.

(Turn over page for  
resignation and  
change of  
particulars.)

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

Company number (e.g. FC 099999):

NF 000159

Company name (in full):

AVIVA INTERNATIONAL INSURANCE  
LIMITED

Appointment

Date of appointment (DD/MM/YYYY):

☐ Appointment of director

☐ Appointment of secretary

Title:

\* See Note 1

Forenames \*:

Surname:

\* See Note 1

Previous name \*:

Usual residential address:

Address Line 1

Address Line 2

Post town

County/region

Postcode:

Country:



**Complete this section in all cases where particulars have changed and then the appropriate section below, i.e. Change of name.**

### Change of Particulars

Date of change of particulars (DD/MM/YYYY):

--	--	--	--	--	--	--	--

Please mark the appropriate box. If change of particulars etc. is as director and secretary mark both boxes.

☐ Change of particulars as director

<input type="checkbox"/>	Change of particulars as secretary
--------------------------	------------------------------------

Forenames \*:

[illegible]

**Names previously notified to Companies Registry.**

**Surname:**

[illegible]

Date of birth † (DD/MM/YYYY):

--	--	--	--	--	--	--	--

(enter new name).

**Change of name:**

\* See Note 1

Forenames \*:

[illegible]

**Surname:**

[illegible]

(or new address).

**Change of usual residential address:**

Address Line 1

[illegible]

Address Line 2

[illegible]

Post town

[illegible]

County/region

[illegible]

Postcode:

--	--	--	--	--	--	--	--

Country:

[illegible]

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.

† Directors only

**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):**

[illegible]

**A serving director/secretary etc. must also sign the form below**

**Counter signature**

**A serving director/secretary etc. must also sign the form below**

**Signed:**

Date (DD/MM/YYYY):

1	2	1	0	2	0	1	2
---	---	---	---	---	---	---	---

(by a serving ~~director~~/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  
information on this  
form?**

**Contact name:**

[illegible]

**Address:**

Address Line 1

[illegible]

Address Line 2

[illegible]

Post town

[illegible]

County/region

[illegible]

Postcode:

**Tel:**

[illegible]

## 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 years.

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

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