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

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Ple appropria арро director a mari

Address Line 2

Post town

Postcode:

Country:

County/region

lease use upper ad/or lower case	Company number (e.g. FC 099999):	Will Not be accepted
s exactly as you them to appear mpany name in	NF 000159	
Black ink. e leave a blank	Company name (in full):	
ox to indicate a space.	AVIVA INTERNATIONA	LINSURANCE
ase complete all aining boxes on a form legibly, in ITAL LETTERS	LIMITED	
nd in Black Ink. e leave a blank		
ox to indicate a space. Use a eparate row for h address line.	Appointment	
ese 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 oppointment is as	Appointment of secretary	
or and secretary eark both boxes.	Title:	i
		•
* See Note 1	Forenames *:	
	Surname:	
* See Note 1	Previous name *:	
	Usual residential address:	
Address Line 1		

† Directors only

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Complete this section in all cases where	Change of Particulars 642(1)(0) Page 3
particulars have changed and then the appropriate section below, i.e. Change of name.	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. * See Note 1 Names previously notified to Companies Registry.	Change of particulars as director Change of particulars as secretary Forenames *:
	Surname:
	Date of birth † (DD/MM/YYYY):
(enter new name). * See Note 1	Change of name: Forenames *:
	Surname:
enter 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. Tlease leave a blank box to Indicate a space. Use a eparate row for each address line. Please do not fold this form.	Postcode: Country:
† Directors only	

Change of Particulars (continued)

Please complete all remaining boxes on this form legibly, in CAPITAL LETTÉRS 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 cl	hange	(pleas	e spe	cify):																		
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After signing please return the form to: Companies Registry 1st Floor, Waterfront Plaza 8 Laganbank Road Belfast BT1 3LX

To whom should	Contact name:													
empanies Registry rect any enquiries about the														
nformation on this form?	Address:													
Address Line 1		_												
Address Line 2		-												
Post town		_												
County/region		•												
	Postcode: Tel:													

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 subsidiary of the same parent сотралу.