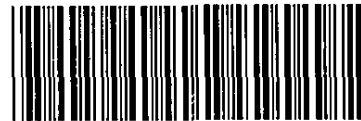


642(1)(b)

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

TUESDAY



J1JN0NH6

JNI

16/10/2012

#100

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.

Company number (e.g. FC 099999):

NF 000159

Company name (in full):

AVIVA INTERNATIONAL INSURANCE
LIMITED

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.

Appointment

Date of appointment (DD/MM/YYYY):

☐ Appointment of director

☐ Appointment of secretary

Title:

(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.

* 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]

(enter 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

- 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 company.