

## 642<sub>(1)(b)</sub>

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

This form s	hould	be co	mplete	ii be
black			-	

CRFA 0002.

**Company Number** 

**Company Name** 

CN FL 001149	
NAVIGATORS AND GENERAL	
INSURANCE COMPANY LIMITE	<u>D</u>

Appointment		
(Turn over page for resignation and change of particulars).  Date of appointment	Day Month Year  DA 27072006	
Appointment of director Show the 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  Appointment of secretary Name *Style/Title Forenames	Please mark the appr If appointment is as d both boxes.  MRS  MARGARET ANN	DEPARTMENT OF ENTERPRISE TRADE AND INVESTMENT  - 7 FEB 2007
office on the usual residential address line.  Surname  *Honours etc	PORTER	POST RECEIVED COMPANIES REGISTRY
Give previous forenames or surname except: for a married woman the name before marriage need not be given, for names not used  Previous forenames  Usual residential address	AD 57 BELVEDERE	GARDENS
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  County/Region	BASINGSTOKE HAMPSHIRE	
instead of or in addition to the forenames and surname.  County/Region Postcode	RG24 8GB Country EN	JGLAND
Date of birth†  Business occupation†	DO OC	lationality† NA
in the case of an individual who has no business occupation but holds other directorships, give particulars of them. (if any), if none Other directorships	OD	

\* Voluntary details

† Directors only

A serving director etc. must also sign the form overleaf.

Resignation	<del>                                   </del>		
(This includes any form of ceasing	DR		
to hold office e.g. death or removal from office). Resignation etc. as director	Please mark the appropriate box.  If resignation etc., is as director and secretary		
Resignation etc. as secretary	xs mark both boxes		
Forenames			
Surname			
Date of birth (directors only)	DO		
If cessation is other than resignation, please state reason (e.g. death)			
CHANGE OF PARTICULARS			
Date of change of particulars	DC , , , ,		
Complete this section in all cases Change of particulars as director	ZD Please mark the appropriate box.		
where particulars Change of particulars as secretary have	If change of particulars etc., is as director and secretary mark both boxes		
and then Forenames (names previously			
appropriate section  The appropriate Surname Surname Registry)			
Date of birth (directors only)	DO		
Change of name (enter new name) Forenames	NN		
Surname			
Change of usual residential address (enter new address)	AD		
•			
Post town			
County/Region			
Postcode	Country		
Other Change (please specify)			
	A serving director / secretary / person authorised must also sign the form below		
Signature	Signed Date Date		
After signing please return the form to the Registrar of Companies at	(director / secretary / person authorised). (Delete as appropriate)		
64 Chichester Street, Belfast BT1 4JX			
To whom should Companies Registry direct any enquiries about the information shown on this form?	Mr D S Boyles Zurich Insurance Company 7 Upper Queen Street stcode Belfast BT1 6QD 028 9055 8849 tension		