

## 642 (1) (b)

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

## This form should be completed in black

Company number

CN FC 001149

THE NAVIGATORS AND GENERAL

Company name

~		
		INSURANCE COMPANY LIMITED
Appointment		D. M. M. W.
(Turn over page	Date of appointment	Day Month Year  DA 011 017 017
for resignation and change of particulars).	Appointment of director	CD Please mark the appropriate box.
,	Appointment of secretary	If appointment is as director and secretary mark both boxes
	ame *Style/Title	MR
NOTES Show the full forenames. NOT INTITIALS if the director or secretary is a Corporation or Scottish lirm, show the name on	Forenames	GAVIN RUSSELL CAMERON
surname line and registered or principal office on the usual residential address line.	Surname	MUNNOCH
Give previous forenames or surname except: for a married women the name before marriage need not be given, for names not used since the age of 18 or for at least 20 years.	*Honours etc	
	Previous forenames	
to not all least 20 years.  I peer or an individual known by a title may tate the title instead of or in addition to the prenames and surname.	Previous surname	
	Usual residential address	AD THE ZURICH CENTRE
		3000 PARKWAY
	Post town	WHITELEY
	County/Region	FAREHAM, HAMPSHIRE
	Postcode	POIS 7JZ Country ENGLAND
	Date of birth†	DO 213017 512 Nationality   BRITISH
the case of an individual who as no business occupation but olds other directorships, give articulars of them.	Business occupation† (if any), if none	OC COMPANY DIRECTOR
	other directorships.	OD
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\*Voluntary details

†Directors only

A serving director etc must also sign the form overleaf.

Resignation		
	Date of resignation etc	DR 311 1206
(This includes any form of ceasing to hold office e.g.	Resignation etc. as directo	Please mark the appropriate box. If resignation etc is as director and secretary
death or removal from office).	Resignation etc. as secretary	xs mark both boxes
	Forenames	
	Surname	THOMPSON
	Date of birth (directors only,	00 1 19 112 518
If cessation is other than resignation, please state reason (eg death,		
CHANGE OF PARTI		
	Date of change of particulars	
	Change of particulars, as director	If change of particulars is as director and secretary
Complete this section in all cases where particulars have	Change of particulars, as secretary	ZS mark both boxes
changed and then the appropriate section below.	Forenames (name previously notified to Companies Registry)	
Sciow.	Comaine	
Date of birth (directors only)  Change of name (enter new name)  Forenames		NN NN
Onange of hame temes	r new name) Forenames  Surname	
Observation 1	1	
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
After director also and		
After signing please return the form to the Registrar of Companies at		<del>IDB House -</del> 64 Chichester Street: Belfast BT1-4JX-
To whom should Compa	anies Registry direct any	
enquiries about the information on this form?		Mr D S Boyles
		Zurich Insurance Company 7 Upper Queen Street
	•	Belfast
		BT1 6QD 028 9055 8849