	642(1)(b) Page 1
642(	1)(b) Return of alteration in the for official use altach barcode here
,	XXIII company or in their
	particulars Photocopies of this form
Please use upper	Company number (e.g. FC 099999): will not be accepted
and/or lower case letters exactly as you stend them to appear	NF 002766
n Company name in Black Ink.	
Please leave a blank box to indicate a	Company name (in full):
space. Please complete all	CAU TRUST MANAGERS LIMITED
remaining boxes on this form legibly, in	
CAPITAL LETTERS and in Black Ink.	
isase leave a blank box to indicate a space. Use a	
Separate row for son address line.	Appointment
lease do not fold this form.	Date of appointment (DD/MM/YYYY):
(Turn over page for resignation and	
change of particulars.)	Appointment of director  Appointment of secretary  Appointment of secretary  *J3MFKS96*  JNI 10/12/2014 #26
Please mark the	
ppropriate box. If the	Appointment of secretary
appointment is as irector and secretary	Title;
appointment is as	Title:  *J3MFKS96*  JNI 10/12/2014 #26  COMPANIES HOUSE
appointment is as irector and secretary	Title;
appointment is as irector and secretary mark both boxes.	COMPANIES HOUSE
appointment is as irector and secretary mark both boxes.	COMPANIES HOUSE
appointment is as irector and secretary mark both boxes.	Forenames *:
appointment is as irector and secretary mark both boxes.	Forenames *:
appointment is as irector and secretary mark both boxes.  * See Note 1	Forenames *:  Surname:
appointment is as irector and secretary mark both boxes.  * See Note 1	Forenames *:  Surname:  Previous name *:
appointment is as irector and secretary mark both boxes.  * See Note 1	Forenames *:  Surname:
appointment is as irector and secretary mark both boxes.  * See Note 1  * See Note 1  Address Line 1	Forenames *:  Surname:  Previous name *:
appointment is as irector and secretary mark both boxes.  * See Note 1	Forenames *:  Surname:  Previous name *:
appointment is as irector and secretary mark both boxes.  * See Note 1  * See Note 1  Address Line 1	Forenames *:  Surname:  Previous name *:
sppointment is as irector and secretary mark both boxes.  * See Note 1  * See Note 1  Address Line 1	Forenames *:  Surname:  Previous name *:
* See Note 1  Address Line 2  Post town	Forenames *:  Surname:  Previous name *:
* See Note 1  Address Line 2  Post town	Forenames *:  Surname:  Usual residential address:

	Appointment (continued)
Please complete all remaining boxes on	Date of birth † (DD/MM/YYYY):
this form legibly, in CAPITAL LETTERS	
and in Black Ink. Please leave a blank	Nationality †:
box to indicate a space. Use a	
separate row for each address line.	Business occupation †:
Please do not fold this form.	
	Other directorships †:
	Yes No
‡ See Note 2	Other directorships detail ‡:
	Consent signature
	Signed: Date (DD/MM/YYYY):
	A serving director etc. must also sign the form on page 4
(This includes any	Resignation
form of ceasing to hold office e.g. death	
or removal from office.)	Date of resignation (DD/MM/YYYY):
	06071988
Please mark the appropriate box, if	Resignation etc. as director
resignation etc. is as director and secretary	Resignation etc. as secretary
mark both boxes.	Forenames *:
* See Note 1	ANTHONY BLAKE
	Surname:
	WYAND
	Date of birth † (DD/MM/YYYY):
	24 11 19 43
	If cessation is other than resignation please state reason (e.g. death):

. .

† Directors only

كقطنه	642	(1)(b) Page 3
Complete this section in all cases where	Change of Particulars	(1)(n) rage 3
particulars have changed and then the	Date of change of particulars (DD/MM/YYYY):	
appropriate section below, i.e. Change of name.		
Please mark the appropriate box. If	Change of particulars as director	
change of particulars etc. is as director and secretary mark both	Change of particulars as secretary	
boxes. * See Note 1	Forenames *:	<del></del>
Names previously		
. notified to Companies	Surname:	
Registry.		
	Date of birth † (DD/MM/YYYY):	
(enter new name).	Change of name:	
* See Note 1	Forenames *:	
		TT
	Surname:	
		نلل
ಾರ್.er new address).	Change of usual residential address:	
Address Line 1		
Address Line 2		
_		
Post town		
County/region		
Please complete all	Postcode:	
remaining boxes on this form legibly, in		
CAPITAL LETTERS and in Black Ink. Tlease leave a blank	Country:	
<ul> <li>box to indicate a</li> </ul>	· · · · · · · · · · · · · · · · · · ·	
space. Use a eparate row for each address line.		
Prease do not fold		

† 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 sp	oecify):	
A serving director/secreta	ry etc. must also sign the form below	N
Counter signature	tary etc. must also sign the form belo	DW
Signed:	ally etc. Hust also sign the form bein	Date (DD/MM/YYYY):
Milwan	, Director Avia	25112014
(by a serving director/se	cretary/administrative	- b 1 le 1 de 1

After signing please return the form to: **Companies Registry** 1st Floor, Waterfront Plaza 8 Laganbank Road Beifast BT1 3LX

receiver). (Delete as appropriate)

To whom should
Companies Registry
direct any enquiries
about the
information on this

Contact name:

about the mation on this	JAMES VINCE	L
form?	Address:	
Address Line 1	AVIVAUKLIFE	_
		_
Address Line 2	2 ROUGIER STREET	_
		_
Post town	YOKK	J
County/region	MORTH YORKSHIRE	į L
	Postcode:	

70	90	ul	·				
Tel:							

## Notes

1. Show all full forenames, NOT INITIALS. If the director or secretary is a Corporation or Scotlish 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
- a wholly subsidiary of the company making the return
- another wholly owned subsidiary of the same parent