642(1)(b) Return of alteration in the directors or secretary of a Part for official use attach barcode here XXIII company or in their particulars Photocopies of this form will not be accepted Company number (e.g. FC 099999): Please use upper and/or lower case letters exactly as you 0027 inlend them to appear in Company name in Black ink. Company name (in full): Please leave a blank box to indicate a space. Please complete all remaining boxes on this form legibly, in CAPITAL LETTERS and in Black Ink. · lease leave a blank box to indicate a space. Use a **Appointment** separate row for ach address line. Hease do not fold Date of appointment (DD/MM/YYYY): this form. (Turn over page for resignation and change of particulars.) Appointment of director Please mark the Appointment of secretary appropriate box. If the JNI 10/12/2014 appointment is as director and secretary Title: **COMPANIES HOUSE** 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:

642(1)(b) Page 1

16

_	542(1)(b) Page 2
	Appointment (continued)
Please complete all	Date of birth † (DD/MM/YYYY):
remaining boxes on 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.	
Please do not fold this form.	Business occupation †:
<b></b>	
	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 form of ceasing to	Resignation
hold office e.g. death or removal from	Date of resignation (DD/MM/YYYY):
office.)	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 *:
¹ See Note 1	PETER GERARDUS
	Surname:
	GRAM
	Date of birth † (DD/MM/YYYY):
	If cessation is other than resignation please state reason (e.g. death):
† Directors only	

Complete this section	Change of Particulars	642(1)(b) Page 3
in all cases where 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.	Change of particulars as director  Change of particulars as secretary  Forenames *:	
* See Note 1 Names previously notified to Companies	Surname:	
Registry.		
	Date of birth † (DD/MM/YYYY):	
(enter new name).	Change of name:	
* See Note 1	Forenames *:	<del></del>
	Surname:	
icitier new address).	Change of usual residential address:	
Address Line 1		
Address Line 2		
Post town		
O-vete/essies		
County/region		1 1 - 1 -
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 leparate row for each address line.  Stease do not fold this form.	Postcode:  Country:	

† Directors only

## Change of Particulars (continued)

<b>5</b>	Otto and an activities and activities
Please complete all remaining boxes on	Other change (please specify):
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	A serving director/secretary etc. must also sign the form below
this form.	Counter signature
	A serving director/secretary etc. must also sign the form below  Signed: Date (DD/MM/YYYY):
	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Millian Director, Wiva
	(by a serving director/secretary/administrator/administrative receiver). (Delete as appropriate)  Company Services Ltel.
	Sanica I Fel
	After signing please return the form to:
	Companies Registry
	1st Floor, Waterfront Plaza 8 Laganbank Road
	Belfast BT1 3LX
To whom should Companies Registry	Contact name:
direct any enquiries about the	JAMES VINCE
information on this form?	Address:
Address Line 1	
)1001000 Ditto (	AVIVA UK LIFE
Address Line 2	2 ROAGIER STREET
Post town	Y O K K
County/region	NORTH YORKSHIRE
	Postcode:
	7090 144
	Tai·

## **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 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 al 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.