

CH01 (ef)

Change of Particulars for Director



Company Name: SOUTH SHORE MUTUAL INSURANCE COMPANY LIMITED

00399783 Company Number:

Received for filing in Electronic Format on the: 10/09/2012

Details Prior to Change

MRS AMANDA JEAN THOMPSON Original Name:

02/09/1962 Date of Birth:

New Details

Date of Change: 10/09/2012

Service Address recorded as Company's registered office

The usual residential address of this person has not changed

Authorisation

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This form was authorised by one of the following:

Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver Manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor.