

288b

RESIGNATION of director or secretary

(NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

Please complete in typescript, or in bold black capitals

CHFP055

Company Number 912211

Company Name in full

AA COMMERCIAL INSURANCE SERVICES LIMITED

Resignation form			Day	Month	,	Year				
	Date of resignation		2 3	0 9	1 9	9	9			
Resignation as dire					as	secre	tary		e appropriate box. If resignation rand secretary mark both boxes.	
	NAME *Style / Title		MRS					*Honours etc	BA(Hons) LLM(CANTAB) Barrister	
Please insert details as previously notified to Companies House.		Forename(s)	MAXINE LOUISE							
	Surname		HARR	ISON	_					
			Day	Month	,	Year				
	†Date of birth									
If cessation is other than resignation, please state reason										

±	Voluntary	details.

A serving director, secretary etc must sign the form below.

Signed

Date

110/99

(** by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver)

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query



Form revised July 1998

Mrs J M Pomroy
The Automobile Association
Norfolk House
Priestley Road
BASINGSTOKE
Hampshire RG24 9NY

When you have completed and signed the form please send it to Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardif for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

[†] Directors only.

^{**} Delete as appropriate.