

288c

CHANGE OF PARTICULARS for director or

Please complete in typescript, or in bold black capitals.		(NOT for appointment (use Form	288a) or resign	nation (use Form 288b))
CHFP010	Company Number	1151611		
Company Name in full		CENTOR INSURANCE & RISK MANAGEMENT LIMITED		
Changes of particulars form	Complete in all cases		3 1 0 2	Year
	Name * Style / Title	* Honours etc		
	Forename(s)	NEIL STEWART		
Surname † Date of Birth		WALTON Day Month Year 3 1 0 1 1 9 6 8		
(enter new name)	Surname			
Change of usual residential address		The Gables, Potters Green, nr Dane End		
(enter new address)	Post town	Ware		
	County / Region	Hertfordshire	Postcode	SG12 OJU
	Country			
Other Change	(please specify)		<u></u>	
		A serving director, secretary etc must sign the form below.		
* Voluntary details. Signed † Directors only.		ve-	Date	11-11-02.
** Delete as appropria	ate.	(**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		Friars Secretariat Limited, 2 Bath Place, Rivington		
		Street, London, EC2A 3JJ		

should contact if there is any query.

Tel DX number DX exchange



When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh