

Terminating appointment as director or

secretary

Please complete in typescript, or in bold black capitals.

CHFP010

Company Number

Company Name in full

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

2413321

Automobile Association Insurance Services Holdings

Limited

Date of termination	n of appointment	Day Month Year 0 1 0 6 2 0 0 5		
as director		as secretary X Please mark the appropriate box. If terminating appointment as a director and secretary mark both boxes.		
NAME	* Style / Title	* Honours etc		
Please insert details as previously notified to Companies House.	Forename(s)	Clifford Chance Secretaries (CCA)		
	Surname	Limited		
	† Date of Birth	Day Month Year		

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

Signed

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.



COMPANIES HOUSE 14/06/05

Date

(** serving director/sec

The Company	Secreta	ary The AA,	Southwood East,	Apollo		
Rise, Farnb	orough,	Hampshire,	GU14 OJW			
Tel						
DX number		DX exchan	ge			

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

^{*} Voluntary details.

[†] Directors only.

^{**} Delete as appropriate.