

BR4

Return by an oversea company subject to branch registration of change of directors or secretary or of their particulars

(Pursuant to Schedule 21A, paragraph 7(1) of the Companies Act 1985)

CHFP010

Please complete in typescript, or in bold black capitals.

Company Number	F000345 Branch Number BR 2046
Corporate Name	THE GOVERNOR AND COMPANY OF THE BANK OF IRELAND
Branch Name	

Resignation, etc.

(This includes any form of ceasing to hold office e.g. death or removal from office). Date of resignation etc.

ceasing to hold office e.g. death Resignation etc. as director

Resignation etc. as secretary

Forenames

(If different)

Surname

Date of birth (directors only)

(See note on page 4)

Day	Month	Year	
3 1	0 7	2 0 0 9	
V	4		the appropriate box. etc is as a director and secretary kes
JOHN I	BOSCO		
CLIFFO	RD		
Day	Month	Year	

This return is delivered in respect of all the branches listed on page 4

You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the public record.



DX number	DX exc
IRELAND	Tel +353 1 6043472
BANK OF	IRELAND, LOWER BAGGOT STREET, DUBLIN 2,
ELLA CULI	LEN, GROUP SECRETARY'S OFFICE,

When you have consend it to the Companies Hou

Appointment (Turn to page 3 to notify alteration of particulars)

Date of appointment

Appointment of director

Appointment of secretary

NOTES Show the full forenames.	Name	*Style/title
NOT INITIALS. If the direct or secretary is a Corporati or Scottish firm, show the		Forenames
name on surname line and registered or principal office		Surname
on the usual residential address line.		*Honours etc
Give previous forenames or surnames except:	Previo	us forenames
- for a married woman th	e Prev	ious surname
name before marriage need not be given. - for names not used	Usu	al residential address ††
since the age of 18 or f at least 20 years.	or	

A peer or individual known by a title may state the title instead of or in addition to the forenames and surnames.

Post town

County/region

Postcode

†Date of birth * Voluntary details

† Directors only

†Nationality

†Business Occupation

†Other directorships

Please list all other directorships

Scope of authority

Give brief particulars of the extent of the powers exercised (e.g. whether they are limited to powers expressly conferred by the instruments of appointment, or whether they are subject to express limitations) where the powers are exercised jointly, give the name(s) of the person(s).

Mark as applicable

This return must be delivered to the Registrar within 21 days of the notice being received in Great Britain in due course of post (if despatched with due diligence)

Day Month Year
3 1 0 7 2 0 0 9
Please mark the appropriate boy
Please mark the appropriate box. If appointment is as director and secretary mark
both boxes.
MS
HELEN
NOLAN
CASTLEGRACE LODGE
LOWER ALBERT RD
SANDYCOVE
CO.DUBLIN
Country IRELAND
†† Do not tick this box unless the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section
723B of the Companies Act 1985
Day Month Year
The extent of the authority to represent the company is:- (give details)
LIMITED BY THE BYE-LAWS OF THE BANK. MAY REPRESENT/
BIND THE BANK IF SPECIFICALLY AUTHORISED BY A
RESOLUTION OF THE DIRECTORS.
These powers:-
May be exercised acting alone
Must be exercised with:- (Give names of co-authorised person(s))
VARIOUS NAMED DIRECTORS/OFFICERS ON A CASE SPECIFIC
BASIS, WHICH VARIES FROM CASE TO CASE.



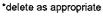
	ATION OF CULARS	(this section is not for appointments or resignations)	Day Month Year
Complete this section in all cases where particulars of a serving director / secretary have	Change of pa	hange of particulars rticulars, as director	Please mark the appropriate box. If change of particulars is as director and secretary mark both boxes
changed and then the appropriate section below	Surname	(names previously notified to Companies House birth (directors only)	Day Month Year
Change o	(enter new nam	Forenames Surname ential address †† (enter new address)	
		Post town County / region Postcode	Country †† Do not tick this box unless the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985
Give brief pa authority of a company, ind manner in wi may be exer	o authority to articulars of any cha director to repres cluding any alterat hich existing or ner cised (e.g. requirin th other persons.)	ent the ion to the w powers	The extent of the authority of the above person to represent the company has been altered to:- (give details) These powers:-
	# Mark as	applicable	# May be exercised alone or # Must be exercised with:- (Give names of co-authorised persons)



Registration number	Branch name						
BR 2046	THE GOVERNOR AND COMPANY OF THE BANK OF IRELAND						

NOTE:- A return must be delivered in respect of any alteration to the company particulars by each branch of an oversea company. If, however, a company has more than one branch in THE SAME PART of Great Britain, it may deliver only one form in respect of all those branches, provided it completes the table above on this page.

Signature								
Signed	D.R	~~	D	ate	12	8	रक्त	
	*Director / Secretary	/ Permanent representative		-				







List of other directorships Schedule to form BR4

Please complete in typescript, or in bold black capitals.

CHFP010

Company Number

FC	345				
l .			 	 	

Corporate Name

THE	GOVERNOR	AND	COMPANY	OF	THE	BANK	OF	IRELAND	

Name

Please list all other directorships		
Company Name		Resignation
	İ	