BR4 Return by a Part XXIII company subject to branch registration of change of directors or secretary or of their particulars



(Pursuant to Schedule 20A, paragraph 7(1) of the Companies (Northern Ireland) Order 1986.)

Photocopies of this form

	Company number (e.g. FC 099999):					
	F C 0 0 1 4 4 0					
	Branch number:					
Please use upper and/or lower case	Company name (in full):					
letters exactly as you ntend them to appear in Company name in	A V I S R E N T A C A R L I M I T E D					
Black Ink. Please leave a blank box to indicate a						
space.						
Please complete all remaining boxes on this form legibly, in	Branch Name (if different):					
CAPITAL LETTERS and in Black Ink. Please leave a blank						
box to indicate a space. Use a separate row for						
each address line. Please do not fold this form.						
(Turn over page for resignation and	Appointment					
change of particulars.)	Date of appointment (DD/MM/YYYY):					
	0 5 1 1 2 0 0 7					
Please mark the appropriate box. If the	Appointment of director DEPARTMENT OF ENTERPHISE TRADE AND INVESTMENT					
appointment is as director and secretary mark both boxes.	Appointment of secretary 0 8 JAN 2008					
	Title: POST RECEIVED COMPANIES REGISTRY					
* See Note 1	Forenames *:					
	K E V I N M I C H A E L					
	Surname:					
	B R A D S H A W					
* See Note 1	Previous name *:					

	Appointment (continued) BR4 Page 2
	Usual residential address:
Address Line 1	S W A N M O R E P A R K F A R M H O U S E
Address Line 2	UPPERSWANMORE
Post town	SOUTHAMPTON
County/region	
Please complete all remaining boxes on this form legibly, in CAPITAL LETTERS and in Black Ink. Please leave a blank box to indicate a space. Use a separate row for each address line. Please do not fold this form.	Postcode: S O 3 2 2 Q Q Date of birth † (DD/MM/YYYY): 2 0 0 2 1 9 6 9 Nationality †: B R I T I S H Business occupation †:
‡ See Note 2	COMPANY DIRECTOR Other directorships †: Yes No Other directorships detail ‡:
± See Note 3 The extent of the	Scope of authority ± :
authority to represent the	
company is (give details)	
	These powers:
Mark as applicable	May be exercised acting alone, or Must be exercised with: (give names of co-authorised person(s))

Consent signature

Signed:

I consent to act as director/secretaryl of the above named company

† Directors only

Date (DD/MM/YYYY):

A serving director etc. must also sign the form on page ?? - no signature space??

(This includes any form of ceasing to	Resignation	BR4 Page 3						
hold office e.g. death or removal from	Date of resignation (DD/MM/YYYY):							
office.)								
Please mark the appropriate box. If resignation etc. is as director and secretary	as							
mark both boxes.	Forenames *:							
* See Note 1								
Please complete all remaining boxes on		ш						
this form legibly, in CAPITAL LETTERS and in Black Ink.	Surname:							
Please leave a blank box to indicate a								
space. Use a separate row for	Date of birth † (DD/MM/YYYY):							
each address line. Please do not fold								
this form.								
Complete this section in all cases where	Change of Particulars							
particulars have changed and then the appropriate section below, i.e. Change of name.	Date of change of particulars (DD/MM/YYYY):							
Please mark the appropriate box. If	Change of particulars as director							
change of particulars etc. is as director and secretary mark both	Change of particulars as secretary							
boxes. * See Note 1	Forenames *:							
Names previously notified to								
Companies Registry.	Surname:							
	Date of birth † (DD/MM/YYYY):							
•								
(enter new name).	Change of name:							
* See Note 1	Forenames *:							
	Surname:							

Γ	Change of Particulars (continued)
(enter new address).	Change of usual residential address:
Address Line 1	
Address Line 2	
Post town	
County/region	
Please complete all remaining boxes on this form legibly, in CAPITAL LETTERS and in Black Ink. Please leave a blank box to indicate a space. Use a separate row for each address line. Please do not fold this form. + See note 4 The extent of the authority of the above person to	Postcode: Country: Nationality: Change to authority to act + (if applicable):
represent the company has been	
altered to (give details)	
Mark as applicable	These powers: May be exercised acting alone, or Must be exercised with: (give names of co-authorised person(s))
** See note on page 5	This return is delivered in respect of all the branches listed on page 5 **
To whom should Companies Registry	Contact name:
direct any enquiries about the information on this	PHILIP HORNER
form?	Address:
Address Line 1	AVIS EUROPE PLC AVIS HOUSE
Address Line 2	PARK ROAD
Post town	BRACKNELL
County/region	BERKSHIRE
	Postcode: R G 1 2 2 E W Tel:

0 1 3 4 4 4 2 6 6 4 4

Please complete all remaining boxes on this form legibly, in CAPITAL LETTERS and in Black Ink. Use a separate row for each Registration number. Please do not fold this form.

Counter signature A serving director/secretary etc. must also sign the form below	
Signed:	Date (DD/MM/YYYY):
	04012008
(by a serving director/secretary/administrator/administrative receiver). (Delete as appropriate)	

After signing please return the form to Companies Registry at: 1st Floor, Waterfront Plaza 8 Laganbank Road Belfast BT1 3LX

This return must be delivered to the Registrar within 21 days of the notice being received in Northern Ireland in due course of post (if dispatched with due diligence).

Registration number	Branch name	

Note **

A return must be delivered in respect of any alteration to the company particulars by each branch of a Part XXIII company. If, however, a company has more than one branch in Northern Ireland, it may deliver only one form in respect of all those branches, provided it completes the table above on this page.

Notes

1. Show all full forenames, NOT INITIALS. If the director or secretary is a Corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential address line.

Give previous forenames or surname except:

- for a married woman the name before marriage need not be given,
- for names not used since the age of 18 or for at least 20 years.

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

- 2. Give the name of every company incorporated in Northern Ireland which the person concerned is a director or has been a director at any time in the past 5 years. Exclude a company which either is, or at all times during the past 5 years when the person was a director, was
- dormant
- a parent company which wholly owned the company making the return
- a wholly owned subsidiary of the same parent company.
- 3. Give brief particulars of the extent of the powers exercised (e.g. whether they are limited to powers expressly conferred by the instrument of appointment, or whether they are subject to express limitations) where the powers are exercised jointly, give the name(s) of the person(s).
- 4. Give brief particulars of any change in the authority of a director to represent the company, including any alteration to the manner in which existing or new powers may be exercised (e.g. requiring them to be exercised with other persons).