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IORDANS

21 St Phomas Street Bristol BS1 63S Telephone 0117 923 0606 Fax 0117 923 0063

Company Number

Please complete in typescript, or in bold black capitals.

288b

Resignation of director or secretary

00698957

Co * F 2 8 8	ompany Name in full	INDALEX LIMITED
Resignation		Day Month Year
form	Date of resignation	28 1 2000
	Resignation as director	as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
Please insert details as previously notified to Companies House	NAME *Style / Title	MR *Honours etc M.A. MSA
	Forename(s)	TIMOTHY RUPERT JOHN
	Surname	SNBBS
	1	Day Month Year
	[†] Date of Birth	01 07 67
	tion is other than ion, please state reason	

* Voluntary details.

† Directors only.

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

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

for companies registered in Scotland

Signed

Date

2000

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

STEVEN ME	BEUWISSEN TRUE	
INDAKEX LTD	TENKESBURY ROAD	
CALATENHAM	Tel 01242 699207	
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, CF4 3UZ DX 33050 Cardiff for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh