

288b

Please complete in typescript, Resignation of director or secretary or in bold black capitals.

	Company Number	869208
C	ompany Name in full	HOPKINSONS LIMITED
Resignation form	Date of resignation Resignation as director	Day Month Year 13 05 99 Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME *Style / Title	x as secretary is as a director and secretary mark both boxes. *Honours etc
	Forename(s) Surname	PETER JOHN EVERETT Day Month Year
	†Date of Birth ation is other than ation, please state reason	27 05 54
* Voluntary details.	Signed	A serving director, secretary etc must sign the form below. Date 7 6 9 9

* Voluntar † 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.



Form revised March 1995

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

B. SPENCER				
HOPKINSONS LIMITED, BRITANNIA WORKS				
HUDDERSFIELD	Tel 01484 820820			
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

for companies registered in Scotland

DX 235 Edinburgh