

Piese complete in typescript	(NOT for appointment (use Form 2) of particulars (use Form	88a) or change
CHFP029	1100500	
Company Number	1400500	
Company Name in full	BOWMAKER CREDIT LIMITED	
Resignation		
form	Day Month Year	
Date of resignation	3 1 1 2 1 9 9 9	
Resignation as director	X as secretary Please mark is as a direct	the appropriate box. If resignation or and secretary mark both boxes.
NAME *Style / Title	MR. *Honours et	c
details as previously Forename(s)	PETER FRANCIS	
notified to Companies House. Surname	НООК	
†Date of Birth If cessation is other than resignation, please state reason	Day Month Year 3 1 0 5 1 9 4 4	
	A serving director, secretary etc must sign the f	orm below.
* Voluntary details. † Directors only. ** Delete as appropriate	Date	20/10/40
	(** serving director / secretary / administrator / administrative receiver / rec	æiver manager / receiver)
Please give the name, address, telephone number and, if available, a DX number and Exchange of	MS. S.N. O'CONNOR, 71 LOMBARD STREET, LONDON, EC3P 3BS	
the person Companies House should contact if there is any query.	Tel 020 7 356 1034	
	DX number DX exchange	

COMPANIES HOUSE 08/01/00

Form revised July าษษธ

When you have completed and signed the form please send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ
for companies registered in England and Wales
Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB
for companies registered in Scotland

DX 235 Edin DX 33050 Cardiff

DX 235 Edinburgh