

Company Number

Please complete in typescript, or in bold black capitals.

288b

Resignation of director or secretary

	ompany Name in full	ARCOM	con	rol Systems wy
Resignation form	Date of resignation Resignation as director	Day Month	Year G	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME *Style / Title	DR		*Honours etc
Please insert details as previously notified to Companies House	Forename(s) Surname	PAUL	FREDER	ick
If cessa	[†] Date of Birth tion is other than tion, please state reason	Day Month 22 0つ	Year 35	

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

Signed

Date

2. 5 96

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

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

* Voluntary details. † Directors only.

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thir 8	C(.) to	(KBAD)	CARBRIDE
CBI 5L	~u J	el 0(22	3 411200
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