

Please complete in typescript,

288a **APPOINTMENT of director or secretary**

or in bold black capitals. CHFP000	of particulars (use Form 288c))
Company Num	1781525
Company Name in	full DISABILITY NORTH
Dat appointm	Day Month Year Day Month Year The of the next to the control of
Appointment Appointment as direction NAME *Style /	
NAME *Style / * Notes on completion appear on reverse. Forenam	
Surna	
Previ Forename	e(s) Surname(s)
th Tick this box if the address shown is a service address for the beneficiary of a Post to	ess 2 3 The Figure LOAY
Confidentiality Order L	NEW CANCE POSICOGE
Companies Act 1985 [†] Nation	ality Beinsa tBusiness occupation MEDICAL PRACTITIONES
†Other directors (additional space overl	
Consent signat * Voluntary details.	Cure
† Directors only. **Delete as appropriate	A director, secretary etc must sign the form below. Date 27/10/05
Sign	(*** dispeter / corrector of administrator / administrator receiver receiver receiver
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact you if there is a query on the form. The contact information that you	to NEWCAST-E MATTERIAL THUE
give will be a significant that you	DX number DX exchange
	When you have completed and signed the form please send it to the Registrar of Companies at:

Form April 2002

COMPANIES HOUSE

A4Z COMPANIES HOUSE

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12/10/2005

for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB DX 235 Edinburgh for companies registered in Scotland

DX 33050 Cardiff

Companies House, Crown Way, Cardiff, CF14 3UZ