

Please complete in typescript, or in bold black capitals

288b

Resignation of director or secretary

Company Number			1805739					
Company Name in full			Waters Edge Publishing Limited					
* F288	BD40 *							
Resignation form	ı		Day	Month	Year			
	Date	e of resignation	Day 08	08	96]		
		tion as director	X	Please mark the appropriate box. If re				
Please insert details as previously notified to	NAME	*Style / Title	MR		<u>-</u>		*Honours etc	
		Forename(s)	PAUL					
Companies Ho	use.	Surname	MANUEL					
			Day	Month	Year			
†Date of Birth			18	02	55			
If cessation is other than								
resignation, please state reason								
			A serv	ing direct	tor, seci	retary etc mu	ust sign the for	m below.
* Voluntary detail † Directors only.	s.	Signed	170	M.O	Bro	rel_	Date	2218196
·			by a serv	ring director	U No secretary	/ administrator / a	dministrative 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			ALEX HENDERSON, LUDGATE HOUSE, 245 BLACKFRIARS ROAD, LONDON, SE1 9UY					
							0474 004 704	

DX number

Tel 0171 921 5000

DX 33050 Cardiff

DX 235 Edinburgh

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

for companies registered in Scotland

COMPANIES HOUSE 05/09/96
Form revised March 1995

contact if there is any query.