

Please complete in typescript, or in bold black capitals

288b

Resignation of director or secretary

Company Number			202744	19 							
Company Name in full			ACTIONSQUARE LIMITED								
* F288BD40 *							······································	· .			
Resignation form			Day	Month	Year						
	Dat	14	02	96							
	Resignation as director			X as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes							
Please insert details as previously notified to Companies Hou	NAME	*Style / Title	MR.				*H	onours etc			
		Forename(s)	ARTHUR	WILLIAM	GEORGE	-					
	use.	Surname	VICCAR	Y							
•			Day	Month	Year	_					
		†Date of Birth	26	12	25	_					
If ce resig											
			A servir	ng directo	or, secre	etary etc	: must sig	n the form	below.		

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.

* Voluntary details.

† Directors only.



Signed

Form revised March 1995

MISS D.P. LEGGE, HILL ROMD CAMPBEN Tel 0171 229 W8 788 1282 LONDON DX number DX exchange

Date

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

1/10/96

for companies registered in Scotland

DX 235 Edinburgh

DX 33050 Cardiff