

Please complete in typescript, or in bold black capitals

## 288b

## Resignation of director or secretary

	Comp	any Number	20490	88					
Company Name in full			Highbank Private Hospital Limited						
* F288	BD40 *								
Resignatio orm	n		Day	Month	Year				
	Date of resignation		30	05	97				
	Resignation as director		X as secretary Please mark the approximate is as a director and sec					priate box. If resignation cretary mark both boxes.	
Please insert letails as reviously	NAME	*Style / Title	DR				4	*Honours etc	
		Forename(s)	GEOFFREY						
otified to ompanies Hou	use.	Surname	HAMMONDS						
			Day	Month	Year	_			
		†Date of Birth	15	02	48				
	ssation is ot nation, plea	ther than ase state reason							
			A serv	ing direc	tor, sec	retary	etc mus	t sign the for	rm below.
Voluntary details.		Signed					- \\	Date	- 1 10-

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.

† Directors only.



Form revised March 1995

KEVIN O'CONNELL, WESTMINS	TER HEALTHCARE LTD, 48 LEICESTER SQUARE, LONDON, WC2H 7WH					
	Tel 0171 839 9302					
DX number	DX exchange					

When you have completed and signed the form please send it to the

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

Registrar of Companies at:

Companies House, Crown Way, Cardiff, CF4 3UZ

DX 33
for companies registered in England and Wales

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

DX 33050 Cardiff

24/6/57

for companies registered in Scotland DX 235 Edinburgh