

Please complete in typescript, or in bold black capitals.

288b

RESIGNATION of director or secretary (NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

	Com	panv	Num	ber
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2123483

Company Name in full

PRIME HEALTH LIMITED

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Resignation form		e of resignation	Day 26	Month 08	Year 97 s secretary	Please mark	the appropriate box. If resignation
	nesign	ation as director	V	a	s secretary	is as a direct	tor and secretary mark both boxes.
	NAME	*Style / Title		MR		*Honours etc	_
Please insert details as		Forename(s)		STEP	TEN L	INLEY	
previously notified to Companies House.		Surname		EVANS	3		
•			Day	Month	Year		
		[†] Date of Birth	21	02	47		
	ation is oth ition, pleas	er than e state reason		•			

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

Signed

* Voluntary details.

† Directors only.

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

ed T.R. Bayley

Date

29, 9, 97

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

MR T,R.	BAILEY	WEY HOUSE
FARNHAM	ROAD	GUILDFORD SURREY
GUI 4XS	Tel	01483 557000
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 or

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

for companies registered in Scotland

DX 235 Edinburgh