

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))

2305333

Company Name in full

BRM INSURANCE CONSULTANTS LIMITED

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Resignation form	Date	of resignation	Day 05	Month 02	Year 98		
	Resigna	tion as director		а	s secretary	X	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
	NAME	*Style / Title	MR.			*Hoi	nours etc
Please insert details as previously notified to Companies House		Forename(s)	MER	VYN JO	HN		·
	e.	Surname	VAUC	GHAN			
	.		Day	Month	Year		
		[†] Date of Birth					
	ition is othe	er than e state reason					

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

Signed

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

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Th⊖	Secretary.	Secure	Trust	Bank	PLC

Royex House (Floor 15), Aldermanbury Square,

Date

London EC2V 7HR Tel 0171-600 3831

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

12 FEB 1998

^{*} Voluntary details.

[†] Directors only.