

Resignation of director or secretary

Please complete in typescript,

or in bold black capitals.

	Company Number		23	69713			
Company Name in full F 2 8 8 B 0 1 9 *		AC	BION	SPGR	4 2T	MD	LASOPE
		CIMITED)					
^ 1 Z U U 1		_					
Resignation form	Date of resignation	Day 3	Month	Year 98	,		
-	Resignation as director	✓.	as secr	etary	Please mark to	he appro r and sec	priate box. If resignation cretary mark both boxes.
	NAME *Style / Title	HR.			*Honours 6	etc	
Please insert details as previously notified to Companies House	Forename(s)	WILLIAM BONEST					
	Surname	ARCHER.					
	••	Day	Month	Year			
	[†] Date of Birth	6	<u>S</u>	44			
If cessation is other than resignation, please state reason							
		A servi	ing direct	or, secretar	y etc must s	ign the	form below.

* 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.



Signed

Form revised March 1995

DX number DX exchange

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

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 DX 33050 Cardiff for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland DX 235 Edinburgh