



## C O M P A N I E S H O U S E

\*Voluntary details

†Directors only

Change of director or secretary

A serving director etc must also sign the form overleaf.

Please complete in black paing lypescript or block lettering	•	or change of particulars.
	Company number	CN 2401034
	Cornpany name	STUDENT COANS COMMUNI CIMITED
Appointment		Day Month Year
Turn over page for resignation	Date of appointment	DA 0,111,09,4
and change of particulars).	Appointment of director	Please mark the appropriate box.  If appointment is as a director and secretary
	Appointment of secretary	mark both boxes.
NOTES	Name *Style/title	
Show the full forenames, NOT INITIALS If the director or secretary is a	Forenames	COLIN
Corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential address line.	Surname	WARD
Give previous forenames or surname except:	*Honours etc	
<ul> <li>for a married women the name before tharriege need not be given.</li> <li>for names not used since the age of 18</li> <li>c<sub>2</sub> for at least 20 years.</li> </ul>	Previous forenames	
A peer or individual known by a title may state the title instead of or in addition to the forenames and surname.	Previous surname	
	Usual residential address	AD 'ROCK MOUNT', 108 SINCLAIR
		STREET
	Post town	Helensburgh
	County/region	DUN BARTON SHIRE
	Postcode	G84 90E Country SCOTLANS
Other directorships.	Date of birth <sup>†</sup>	DO 213 016 417 Nationality NA BRITISH
Give the name of every company incorporated in Great Britain of which the person concerned is a	Business occupation <sup>†</sup>	OC ASSISTANT MANAGING DIRECTOR
director or has been a director at any time in the past 5 years. Exclude a company which either is, or at all	Other directorships <sup>†</sup>	
times during the paint 5 years when the person was a director, was - dormant		
<ul> <li>a perent company which wholly owned the company making the return</li> </ul>		
c wholly owned subsidiary of the company making the return - another wholly owned subsidiary of the same perent company.		I consent to act as director/security of the above named company
en e	Consent signature	Signed Date

nesignation		
(This includes any	Date of resignation 10	DRIII
form of ceasing to hold office e.g.	Resilience 16, 84 director	Please mark the appropriate box.
death or removal from office).	Resignation etc, as secretary	If resignation etc is as a director and secretary mark both boxes.
	Forenames	
* • *** ***	Surname	
	Date of birth (directors only)	DO
If cessation is other	than resignation, please state reason	
Change of parti	(eg death)   Culars (this section is not for appointments	
or resignations).	Date of change of particulars	DC
Complete this section in all cases where	Change of particulars, as director	Please mark the appropriate box.
particulars of a serving director/	Change of particulars, as secretary	If change of particulars is as a director and secretary mark both boxes.
secretary, have changed and then the	Forenames (name previously	
appropriate section below.	Surname notified to  Companies House)	
	_ Date of birth (directors only)	DO
Change of name (enter new name) Forenames		MM
	Surname	
Change of usual residential address (enter new address)		AD
	· ·	
	Post town	
	County/region	
	Postcode	
Other change		Country
odiei change	(please specify)	
	· · · · · · · · · · · · · · · · · · ·	A serving director, secretary etc must sign the form below.
	· · · · · · · · · · · · · · · · · · ·	
	Signature	Signed Clashing Date 11/11/94  (by a serving director/secretary/administrator/
After signing places	seturn the form	administrative receiver/receiver). (Delete as appropriate)
After signing please return the form to the Registrar of Companies at or		Companies House, Crown Way, Cardiff CF4 3UZ for companies registered in England and Wales Companies House, 100-102 George Street, Edinburgh EH2 3DJ for companies registered in Scotland.
To whom should Companies House direct any enquiries about the information on this form?		DAVID ROCKLIFE
	·	STUDENT COANS COMPANT LIMITED

100 BOTHWELL ST. GLASGON

Tel: 041-306 - 2197