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Please complete in typescript, or in bold black capitals.

Form revised March 1995

Resignation of director or secretary

	Company Number	02625647
Co * F 2 8 8	ompany Name in full B 0 1 9 ×	AGE CONCERN ST HELENS
Resignation form	Date of resignation	Day Month Year 28 07 97 8 Please mark the appropriate box. If resignation
	Resignation as director NAME *Style / Title	/ as secretary is as a director and secretary mark both boxes. *Honours etc
Please insert details as previously notified to Companies Hous	Forename(s)	FRANCES CONSTANTINE
	Surname se.	HUNT
	†Date of Birth	Day Month Year 03 09 46
resigna	ation, please state reason	A serving director, secretary etc must sign the form below.
* Voluntary details. † Directors only.	Signed	
telephone number	ne name, address, per and, if available, and Exchange of spanies House should	
contact if there is		Tel
	7H284* 339 DUSE 23/12/97	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

DX 235 Edinburgh

for companies registered in Scotland