

Form revised March 1995

Please complete in typescript, or in bold black capitals.

288b

DX 235 Edinburgh

Resignation of director or secretary

Compa X F 2 8 8 B 0 Resignation	mpany Number any Name in ful 19 *	Day Month Year
Res	signation as director	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
NAM	E *Style / Title	
Please insert letails as	Forename(s)	JOANNE
previously notified to Companies House.	Surname	LAWLINS
[†] Date of Birth If cessation is other than		Day Month Year
		A serving director, secretary etc must sign the form below.
* Voluntary details. † Directors only.	Signed	(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver
A35 *AGN0VNC7* 47		ST. GEOF RE'S HOUSE 215-219 CHESTER ROAD MANCHESTER M15 4JE TEL: 0161 832 4901 FAX: 0161 835 3668
		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