

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))

Company	Number
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2847005

Company Name in full

HEALTH & CARE SERVICES (NW) LIMITED



Resig	gnation
form	

Date of resignation

Day Month Year 97 02

Resignation as director

as secretary

Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.

NAME

*Style / Title

*Honours etc

Please insert details as previously notified to Companies House.

Forename(s)

CRAIA WILLIAM

Surname

BOUN

Year Month

†Date of Birth

20

Day

08

If cessation is other than resignation, please state reason

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

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

Signed

Muid. LZ

Date

* 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.

COMPANIES HOUSE 26/03/97

Form revised March 1995

SIMON BISTIOP & PARTINERS

Tel 01905 779417

DX exchange DROITWICH

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