

Please complete in typescript, or in bold black capitals.

CHWP000

288a

DX 235 Edinburgh

APPOINTMENT of director or secretary (NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

| Company Number Company Name in full | | | | 89 | | | | | | | | |
|---|-------------------------|--|--|--|------------|--------|----------------|-------------|----------------|-------|-----------|--|
| | | | | North Wales Deaf Association | | | | | | | | |
| | | | Cymdeithas y Byddar Gogledd Cymru | | | | | | | | | |
| | | | Day Month Year | | | | | | Day Month Year | | | |
| | | Date of appointment | 0 4 | 1 0 2 | 0 0 | 3 | †Date Birth | of × | 1 19 | | 11914 | |
| Appointment form | Appoint | ment as director | Please mark the appropriate box. If appointment as a director and secretary mark both boxes. | | | | | | | | | |
| Notes on completion | NAME | *Style / Title | Mr *Honours etc | | | | | | | | | |
| appear on reverse. | | Forename(s) | William | | | | | | | | | |
| | | Surname | Walker | | | | | | | | | |
| | Previous Forename(s) | | Previous Surname(s) | | | | | | | | | |
| **Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985 | ^{††} Us | ual residential address | Tai Lon | 1 | | | | | | | | |
| | | Post town | Bryngwran Postc | | | | | Postcoo | de LL65 3RN | | | |
| | C | County / Region | Ynys Mon Cou | | | | | Count | ntry UK | | | |
| | | †Nationality | British †Business occupation Retired | | | | | | | | | |
| /- | None | | | | | | | | | | | |
| , | | | | I consent to act as ** director / secretary of the above named company | | | | | | | | |
| * Voluntary details. | Conse | ent signature (| e st | VI | all | kn | | Date | • | 1/10 | 2003 | |
| † Directors only. **Delete as appropriate | | A director, secretary etc must sign the form below. | | | | | | | | | | |
| Signed | | | \mathbb{R} | nest | en, | | | Date | 13 | 3/11/ | ०३ | |
| You do not have to give any contact | | | (**a director / secretary / administrator / administrative receiver / receiver manager / receiver) | | | | | | | | | |
| | | Consent signature A director, secretary etc must sign the form below. Signed A director, secretary etc must sign the form below. Date 13/11/03 ("a director / secretary / administrator / administrative receiver / receiver manager / receiver) North Wales Deaf Association, Quinton Hazell, Glan y Wern Road, Mochdre, Colwyn Bay | | | | | | | | | | |
| do, it will help Companies House to contact you if there is a query on the form. The contact information that you give will be visible to searchers of the | | | Glan y Wern Road, Mochdre, Colwyn Bay | | | | | | | | | |
| | | | North Wales Tel 01492 542235 | | | | | | | | | |
| public record | DX number DX exchange | | | | | | | | | | | |
| A31 *AY058Q43* D163 COMPANIES HOUSE 17/11/03 | | | When you have completed and signed the form please send it to the Registrar of Companies at: Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB | | | | | | | | | |
| Form April 2002 | | *** 1 1/00 | for com | npanies regi | istered in | Scotla | and | | | DX 2 | 35 Edinbu | |

for companies registered in Scotland