

288b

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

	Company Number	3004206		
Company Name in full F 2 8 8 B 0 1 9 ×		RICHMOND UPON THAMES CROSSROADS	CARE	
Resignation form	Date of resignation	Day Month Year 19 11 1998		
Please insert details as previously notified to Companies House	Resignation as director		Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.	
	NAME *Style / Title	DR. *Honours et	c	
	Forename(s)	LINDA PATRICIA	LINDA PATRICIA	
	Surname e.	HUMPHREY Day Month Year		
	†Date of Birth ation is other than tion, please state reason	Day Month Teal		
		A serving director, secretary etc must sig	n the form below.	
* Voluntary details. † Directors only.	Signed	(by a serving director / secretary /-administrator / administrat	ive receiver/receiver manager / receiver)	
Please give the name, address, telephone number and, if available, a DX number and Exchange of		MRS SIC. CROME RICHMO	ND CROSSROADS CARE	

55

DX number

HEATH

the person Companies House should

contact if there is any query.

COMPANIES HOUSE 26/11/98 Form revised March 1995

DX exchange When you have completed and signed the form please send it to the Registrar of Companies at:

Tel 0131

ROAD

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff

TWICKEN HAM

891

TWI 4AW

5013

for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland DX 235 Edinburgh