

Please complete in typescript, or in bold black capitals.

288

RESIGNATION of director or secretary (NOT for appointment (use Form 288a) or change of particulars (use Form 288c))

	Company Number	03076036
	ompany Name in full B 0 1 9 *	MILLER KELSH INSULANCE BROKERS LIMITED.
Resignation form	Date of resignation Resignation as director	Day Month Year 13 07 99 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)	MARIN PETER
	Surname e.	KELSH
	[†] Date of Birth ition is other than tion, please state reason	Day Month Year 15 05 64
		A serving director, secretary etc must sign the form below.
* Voluntary details. † Directors only.	Signed	(by a sensing director / secretary / administrator / administrative receiver / receiver manager / receiver)
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.		Syste Red Jamson Horse 5 Jewry Street hondon ECZN 2PJ Tel N.H 118K 2715

DX number

COMPANIES HOUSE 15/07/99

Form revised March 1995

Registrar of Companies at:

for companies registered in Scotland

DX exchange When you have completed and signed the form please send it to the

DX 235 Edinburgh

Companies House, Crown Way, Cardiff, CF4 3UZ for companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB