

Please complete in typescript, or in bold black capitals.

Form revised March 1995

288b

Resignation of director or secretary

Company Number		3197015	
Company Name in full		GREY OWL MANAGEMENT LIMITED	
¥ F 2 8 8	B 0 1 9 *		
Decignation		Day Month Year	
Resignation form	Date of resignation	11 6 96	
	Resignation as director	as secretary X	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	Forename(s)		
notified to Companies Hous	Surname se.	TEMPLES(NOMINEES)LTD	
	[†] Date of Birth	Day Month Year	
If cessation is other than resignation, please state reason			
* Voluntary details. † Directors only.	Signed	pp Temples(Nominees)L	y etc must sign the form below. td
	ne name, address,		
telephone number and, if available, a DX number and Exchange of			
the person Com contact if there is	panies House should s any query.	Tel	
		DX number DX exchange	
William Will			Way, Cardiff, CF4 3UZ DX 33050 Cardiff ngland and Wales or

for companies registered in Scotland

DX 235 Edinburgh