

288b

Please complete in typescript, or in bold black capitals.

Resignation of director or secretary

	325	3258337				
	ompany Name in full B 0 1 9 ×				ommunity Association Limited	
Resignation form	Date of resignation	Day 76	Month 7	Year 97		
	Resignation as director		as secretary Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.			
Please insert details as previously notified to Companies Hous	NAME *Style / Title	Mes			*Honours etc	
	Forename(s)	SHAR	SHARON ANN			
	Surname e.	ROSTRON				
	†Date of Birth tion is other than tion, please state reason	Day 18 ≈/A	Month	Year		
* Voluntary details. † Directors only.	Signed			the	Date Date Date Date Date Date	
Please give the telephone number the person Componentact if there is	Miss AMANDA HOWELLS MGLERY House, 11-14 CANNON STREET					

BIRMINGHAM

Registrar of Companies at:

DX number

Tel 0121 - 235 - 2831

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

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

Companies House, Crown Way, Cardiff, CF4 3UZ

for companies registered in England and Wales

for companies registered in Scotland

DX exchange HOX 1305-

DX 33050 Cardiff

DX 235 Edinburgh

COMPANIES HOUSE 25/07/97
Form revised March 1995