

Please complete in typescript, or in bold black capitals.

288b

DX 33050 Cardiff

DX 235 Edinburgh

Resignation of director or secretary

c. * F 2 8 8	Company Number ompany Name in full B 0 1 9 *	3286434 CHARLES BAYNES PENSION TRUSTEES LIMITED
Resignation form	Date of resignation	Day Month Year
ioi iii	Resignation as director	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.
Please insert details as previously notified to Companies Hou	NAME *Style / Title	*Honours etc
	Forename(s)	
	Surname se.	SEVERNSIDE NOMINEES LIMITED
	[†] Date of Birth	Day Month Year
If cessation is other than resignation, please state reason		
* Voluntary details. † Directors only.	Signed	A serving directory secretary etc must sign the form below. Date Signed on behalf of (by a SEVIERASIDE TOWN NEEDS TRIM TO PROTECTIVE TRANSPORT TRECEIVER MANAGER / TRECEIVER)
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.		PRESENTED BY:- SEVERNSIDE COMPANY SERVICES COMPANY LAW AGENTS ASPECT HOUSE DX numbe 135/137 CITY ROAD LONDON ECTV 13B When you have completed ont sign 2300 form please send it to the

Registrar of Companie SAX: 0171 490 277

for companies registered in Scotland

Companies House, Crown Way, Cardiff, CF4 3UZ

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

for companies registered in England and Wales

Form revised March 1995

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