

Company Number

Please complete in typescript, or in bold black capitals.

288b

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

× F 2 8 8		Name in full	LEN	IATE LIN	ITED			
Resignation			Day	Month	Year			
form	Dat	e of resignation	20	04	98			
	Resigna	ation as director		á	as secretary	х	Please mark the appropriate box. If resignation is as a director and secretary mark both boxes.	
	NAME	*Style / Title			.,_"	*Ho	nours etc	
Please insert details as previously		Forename(s)	ANNE ROSALIND					
notified to Companies Hous	se.	Surname	BATESON					
			Day	Month	Year			
		†Date of Birth	11	03	57			
	If cessation is other than resignation, please state reason				· · · · · · · · · · · · · · · · · · ·			
			A servin	ıg directo	or, şecretar	y etc m	ust sign the form below.	

3532108

* Voluntary details. † Directors only.

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.

Signed



Form revised March 1995

KPMG, AQ	UIS COURT, 3	FISHPOOL STREET	
ST ALBAN	S, HERTFORDS	IIRE	
AL3 4RF	Tel	01727 733103	
DX number	6132 DX	exchange ST ALBANS	

(by a serving director / secretary / administrator / administrative receiver / receiver manager / receiver)

Date

29.04.98

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

Companies House, Crown Way, Cardiff, CF4 3UZ DX 33050 Cardiff or companies registered in England and Wales or Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh

Directors (See notes 1-5) Please list directors in alphabetical order.		Details of new directors must be notified on form 288a						
Name	* Style / Title	MR		Day	Month	Year		
	* Honours etc		Date of birth	06	09	30		
Forename(s)		JOHN ANTHONY						
	Surname	LYONS						
F	Previous forename(s)							
Previous surname(s)								
Addre	ess	11 CLAREMONT AVENUE						
		WEST TIMPERLEY						
Usual residential address must be	Post town	ALTRINCHAM						
given. In the case of a corporation, give the registered or principal	County / Region	CHESHIRE	HESHIRE Postcode WA14 5N					
office address.	Country		Nationality	IRISH				
В	usiness occupation	RETIRED						
	Other directorships	NONE						
* Voluntary details.								
Name	* Style / Title	MR	_	Day	Month	Year		
	* Honours etc		Date of birth	04	07	65		
	Forename(s)	MICHAEL WILLIAM						
	Surname	LYONS						
F	Previous forename(s)							
	Previous surname(s)	.·						
Addre	ess	5 ST ALBANS CRESCENT						
		WEST TIMPERLEY						
Usual residential address must be given. In the case of a	Post town	ALTRINCHAM						
corporation, give the registered or principal	County / Region	CHESHIRE Postcode WA1						
office address.	Country		Nationality	BRI	TISH			
В	usiness occupation	CEILING FITTER						
	Other directorships	NONE						

Number of Class Aggregate (e.g. Ordinary/Preference) shares issued Nominal Value Issued share capital (See note 9) (i.e. Number of shares issued multiplied by nominal value Enter details of all the shares in issue at the date of this return. per share) ORDY 3 £3 3 £3 Totals List of past and present members (Use attached schedule where appropriate) There were no changes in the period Х A full list is required if one was not included with either of the last two returns. in another format on paper (see note 10) A list of changes is enclosed A full list of members is enclosed **Elective resolutions** If at the date of this return an election is in force to dispense with (Private companies only) annual general meetings, mark this box (see note 11) If at the date of this return an election is in force to dispense with laying accounts in general meetings, mark this box I certify that the information given in this return is true to the best of my Certificate knowledge and belief. Signed **Date** 20.4.98 # Please delete as appropriate. When you have signed the return send it

When you have signed the return send it with the fee to the Registrar of Companies. Cheques should be made payable to Companies House.

This return includes continuation sheets.

Please give the name, address, telephone number and, if available, a DX number and Exchange, for the person Companies House should contact if there is any query.

Wilson Reece & Co		Ref:CLD/LYO			
1 Wilson Patten Street, Warrington, Cheshire					
WA1 1PG	Tel	01925 633851			
DX number	DX e	xchange			

•	Please complete in typescript, or in bold black capitals.	List of past a	-				
Company Number		2602713					
	Company Name in full	LYONS CEILINGS LIMITED					
		Number of shares or so or amount of the date of the last return stock held by existing members company) by at date of this return. Particulars of shares or so the date of the last return first return, since the inco company) by (a) persons who are still return. (b) persons who have cereating the date of the last return.			n (or in the case of the orporation of the members, and		
	Name and address	Number or amount currently held	Number or amount transferred	Date of registration of transfer	Remarks		
	MRS M LYONS 11 CLAREMONT AVENUE WEST TIMPERLEY CHESHIRE	1					
	MR J LYONS 11 CLAREMONT AVENUE WEST TIMPERLEY CHESHIRE	1					
	MR M LYONS 5 ST ALBANS CRESCENT WEST TIMPERLEY CHESHIRE	1					