

Please complete in typescript,

## **RESIGNATION** of director or secretary

288b

or in bold black capitals. CHFP000		(NOT for appointment (use Form 288a) or change of particulars (use Form 288c))
	Company Number	3862667
Company Name in full		CELTIC CARE (NORTH WALES) LIMITED
Resignation form	Date of resignation	Day Month Year   21/10/199
	Resignation as director	X 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 Hou	Forename(s)	
	Surname se.	PARAMOUNT PROPERTIES (U.K.) LIMITED  Day Month Year
	<sup>†</sup> Date of Birth	
If cessation is other than resignation, please state reason		
		A serving director, secretary etc must sign the form below.
* Voluntary details.	Signed	(AUTHORISED SIGNATORY)  Date  21/10/99
† Directors only. ** Delete as appropri	ate	(** serving director/XeXeXeX;X/XoXii)XsXaXirXaXirXii)Xii)XxiiXxiiXxiiXxiiXxiiXxiiXxiiXxii

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.



Form revised July 1998

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

Registrar of Companies at:

Tel

Companies House, Crown Way, Cardiff, CF14 3UZ DX 33050 Cardiff for companies registered in England and Wales Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB

for companies registered in Scotland

DX 235 Edinburgh