

Please complete in typescript, or in bold black capitals

**CHANGE OF PARTICULARS for** director or secretary (NOT for appointment

288c

CH	EDUJO	

CHEDOOO	(	use Form 288a) or resi	gnation (use Form 288b))	
CHFP029	Company Number	3864079		
Company Name in full		MINNLETON ST. SEORGE HEALTHCARE LIMITED  (FORMERLY TREES PARK HEALTHCARE LIMITED)		
oarticulars form <sup>Na</sup>	Name *Style / Title		*Honours etc	
	Forename(s)			
	Surname	HEALTH CARE SCOTLAND LIMITED		
Change of name 'enter new name)	† Date of Birth	Day Month Year		
	e Forename(s)			
	Surname	HEALTHCARE SCOTLAND MANA	GEMENT LIMITED	
Change of usua (enter new address)	al residential address			
	Post town			
	County / Region		Postcode	
	Country			
Other change	(please specify)			
		A serving director, secretary et	c must sign the form below.	
* Voluntary details. † Directors only. **Delete as appropri	Signed ate.	(** director / secretary / administrator / administrator	Date 6/2/2003	
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.		ENS-BATES ASSOCIATES, THE CROFT, CHALFONT LAWE CHORLEYWOOD, RICKMANSWORTH, HERTFORDSHIRE WOS SAP Tel 01923 H32700		
			DX exchange signed the form please send it to the	

Companies House, Crown Way, Cardiff, CF14 3UZ

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

for companies registered in England and Wales

for companies registered in Scotland

DX 33050 Cardiff

DX 235 Edinburgh

Form revised July 1998

A47 \*AZ61 COMPANIES HOUSE

09/04/03