

## 288b

Terminating appointment as director or secretary

| Please complete in typescript,<br>or in bold black capitals.<br>CHWP000   |                           | (NOT for appointment (use Form 288a) or change of particulars (use Form 288c))                         |  |
|---------------------------------------------------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------|--|
| Company Number                                                            |                           | 03964824                                                                                               |  |
| C                                                                         | ompany Name in full       | BRIDGEWELL SECURITIES LIMITED                                                                          |  |
| Date of t                                                                 | ermination of appointment | Day Month Year  0   5   1   0   2   0   0   7                                                          |  |
|                                                                           | as director               | Please mark the appropriate box if terminating appointment as a director and secretary mark both boxes |  |
| Please insert<br>details as<br>previously<br>notified to<br>Companies Hou | NAME *Style / Title       | MR *Honours etc                                                                                        |  |
|                                                                           | Forename(s)               | JAMES PETER                                                                                            |  |
|                                                                           | Surname                   | RENWICK                                                                                                |  |
|                                                                           | 5 <b>¢</b>                | Day Month Year                                                                                         |  |
|                                                                           | †Date of Birth            | 0 3 0 8 1 9 6 0                                                                                        |  |
|                                                                           |                           |                                                                                                        |  |
|                                                                           |                           |                                                                                                        |  |

| * Voluntary details                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Prelle Date 15-10-7                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| † Directors only ** Delete as appropriate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | (** serving director / secretary / administrator / administrative receiver / receiver manager / receiver) |
| You do not have to give any contac                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ·                                                                                                         |
| information in the box opposite but                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                           |
| If you do, it will help Companies House to contact you if there is a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                           |
| query on the form. The contact                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                           |
| information that you give will be visible to searchers of the public                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Tel                                                                                                       |
| record                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | DX number DX exchange                                                                                     |
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16/10/2007 336 **COMPANIES HOUSE** 

Form revised 10/03

Registrar of Companies at 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

A serving director, secretary etc must sign the form below

DX 235 Edinburgh or LP - 4 Edinburgh