

## CHANGE OF PARTICULARS for director or secretary

(NOT for appointment (use Form 288a) or resignation (use Form 288b))

Please complete in typescript,  
or in bold black capitals.

CHFP010

**Company Number**

4331447

**Company Name in full**

PARAMOUNT HEALTHCARE (UK) LIMITED

### Changes of particulars form

Complete in all cases

Date of change of particulars

Day	Month	Year
3	0	0
0	9	2
2	0	0
2		

**Name** \* Style / Title

Mr

\* Honours etc

Forename(s)

PHILIP GEORGE

Surname

LEACH

† Date of Birth

Day	Month	Year
2	6	0
2	1	9
4	9	

### Change of name

(enter new name)

Forename(s)

Surname

### Change of usual residential address

(enter new address)

Post town

County / Region

Country

APARTMENT 4, 7 BALMORAL PLACE

HALIFAX

WEST YORKSHIRE

Postcode

HX1 2BG

### Other Change

(please specify)

A serving director, secretary etc must sign the form below.

**Signed**

P.A. VEVERS

**Date**

7. 10. 02

\* Voluntary details.

† Directors only.

\*\* Delete as appropriate.

(\*\*director/ secretary/ administrator/ administrative receiver/ receiver manager/ receiver)

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.

MR P.A.VEVERS, UNIT 19, MOORLANDS BUSINESS PARK,

BALME LANE, CLECKHEATON, WEST YORKSHIRE, BD19 4EZ

Tel

DX number

DX exchange

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

**Companies House, Crown Way, Cardiff, CF14 3UZ**

**DX 33050 Cardiff**

for companies registered in England and Wales

or

