

Please complete in typescript, or in bold black capitals.

**CHWP000** 

## **CHANGE OF PARTICULARS for director**

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

Company Number		04436257	<u> </u>	
Co	mpany Name in full	UK Hospitals	No. 1	(PT2) Limited
01			Day Mont	h Year
Changes of particulars	Complete in all cases	Date of change of particulars 0 7 0 3 2 0 0 7		
form	Name *Style / Title	Mr	*Honours etc	
	Forename(s)	Anthony		
	Surname	Norris		
		Day Month Year		
	† Date of Birth	0 2 0 2 1 9 6 3		
Change of name (e	nter new name) Forename(s)			
	Surname			
Change of usual residential address †† (enter new address)		Little Hollow, Seal Hollow Road		
†† Tick this box if the	Post town	Sevenoaks		
address shown is a service address for the beneficiary of a	County / Region	Kent	Postco	ode TN13 3SF
Confidentiality Order granted under the provisions of section	Country			
723B of the Companies Act 1985	Other change			
•	(please specify)	A serving director, secretary etc must sign the form below.		
			etc must sign	the form below.
* Voluntary details. † Directors only. **Delete as appropriate	Signed	Man	Dat	e 22/03/07
		(** director / secretary / administrator / administrative receiver / receiver manager / -receiver)		
You do not have to give any contact information in the box opposite but if you do, it will help Companies House to contact		Partnership Incorporations Limited		
	uery on the form. The	Suite 101A, 3 Whitehall Court Lendon SW1A 251		
contact information that you give will be visible to searchers of the public record		Tel: 020 7839 9730 Fax: 020 7839 9730		
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23/03/2007 **COMPANIES HOUSE**  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 Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh or LP - 4 Edinburgh 2