

Please complete in typescript, or in bold black capitals.
CHWPDDD

COMPANIES HOUSE

15/02/05

DEGETYED

288a

DX 33050 Cardiff

DX 235 Edinburgh or LP - 4 Edinburgh 2

(NOT for resignation (use Form 288b) or change of particulars (use Form 288c))

| CHWP000 | | of particulars (use Form 288c)) | | | |
|---|--|--|------------------------------|---|--|
| Company Number | | 4660523 | | | |
| Company Name in full | | SANDWELL ASSOCIATION FOR MENTAL HEALTH | | | |
| | | Day Month Year | Da | y Month Year | |
| Appointment form Notes on completion appear on reverse. | Date of appointment | 2910204 | Date of Birth | 9101959 | |
| | Appointment as director | as secretary | | he appropriate box. If appointment is and secretary mark both boxes. | |
| | NAME *Style / Title | MRS | *Honours etc | | |
| | Forename(s) | KAREN | | | |
| | Surname | BROWN | | | |
| 11 Tick this box if the address shown is a service address for the beneficiary of a Confidentiality Order granted under the provisions of section 723B of the Companies Act 1985 | Previous Forename(s) | None | Previous Surname(s) | INSPER. | |
| | ^{††} Usual residential address | 35 ST HELENS AVENUE | | | |
| | Post town | GREAT BRIDGE, TIP | Postcode | DY47LN | |
| | County / Region | WEST MIDLANDS | Country | ENGLAND | |
| | †Nationality | BRITISH (Business occupation HOUSING | | | |
| | †Other directorships dditional space overleaf) | PROPOSED SIX TOWNS CREDIT UNION | | | |
| Consent signature | | I consent to act as ** director / s | Date | 10/2/05 | |
| * Voluntary details. † Directors only. | | A director, secretary etc must | | <u> </u> | |
| **Delete as appropriate | Signed | Mot. Muelle | <u> </u> | 26/11/2004 | |
| You do not have to give any contact 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 record | | (**a director./ secretary / administrator./ adm | ninictrative receiver / rece | ver manager / receiver) | |
| | | 314 FLOOR, BRADFIELD HOUSE, POPES LANE, | | | |
| | | OLDBURY, WEST MIDLANDS. | | | |
| | | B69 4PA Tel 0121 543 3930 | | | |
| | | 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

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

for companies registered in England and Wales

for companies registered in Scotland

| | Company Number | 4660523 | , |
|-------------------|----------------------------------|---------|---|
| † Directors only. | [†] Other directorships | | |
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NOTES

Show the full forenames, NOT INITIALS. If the director or secretary is a corporation or Scottish firm, show the name on surname line and registered or principal office on the usual residential line.

Give previous forenames or surname(s) except:

- for a married woman, the name by which she was known before marriage need not be given.
- for names not used since the age of 18 or for at least 20 years

A peer or individual known by a title may state the title instead of or in addition to the forenames and surname and need not give the name by which that person was known before he or she adopted the title or succeeded to it.

Other directorships.

Give the name of every company incorporated in Great Britain of which the person concerned is a director or has been a director at any time in the past five years.

You may exclude a company which either is, or at all times during the past five years when the person concerned was a director, was

- dormant
- a parent company which wholly owned the company making the return, or
- another wholly owned subsidiary of the same parent company.