

288a

APPOINTMENT of director or secretary

Please complete in typescript,
or in bold black capitals.
CUEDO40

CHFP010.

Company Number

*	resignation (u of particulars (•

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Appointment form		Date of appointment	3 1	0 5	2 0	0 6] † [Date of Birth	1 6	0 2	1	9	8	0
Notes on completion appear on next	Appointm	ent as director	as secretary X Please mark the appropriate box. If apportunity as a director and secretary mark both both										nt i	
page.	NAME	* Style / Title	MRS				* Hor	nours et	c					
		Forename(s)	KATE	LOUISE			_							
		Surname	ELSDO)N				_						
Previous forename(s)								Previous name(s	I MCD	ONALD			71	
	Usı	al residential address	51 SACKVILLE CRESCENT											
Post town County / Region			HAROL	D MOOD	,			Pos	tcode	RM3 OF	H			
			ESSEX	ζ				Co	untry	ENGLAN	D			
† Nationality		BRITI	SH				usiness upation	CHA	RTERED	SEC	RETA	ARY		
(ac	-	r directorships ace next page)										_		
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Consent signature

- * Voluntary details.
- † Directors only.

Signed

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.



Date

A director, secretary etc must sign the form below.

Date

12/6/06

administrator / administrative receiver / receiver manager / receiver)

KA	KATE ELSDON								
40	BERNARD	STREET, LONDON WC1N 1LW							
		Tel 020 7396 2329							
D	C 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 for companies registered in England and Wales

DX 33050 Cardiff

or

Companies House, 37 Castle Terrace, Edinburgh, EH1 2EB for companies registered in Scotland DX 235 Edinburgh

^{**} Please delete as appropriate