BR6

CHFP010

This form should be completed in black.

This notice must be delivered to the Registrar within 21 days of the alteration being made.

Company Number

Company Name

Branch Name

(If different to corporate name)

Return of change of person authorised to accept service or to represent the branch of an oversea company or of any change in their particulars

(Pursuant to Schedule 21A, paragraph 7(1) of the Companies Act 1985)

FC021576	Branch Number	BR004773	
WINDSURFER LIMITE	D C		
WINDSURFER LIMITE	D		

TERMINATION OF AUTHORITY

See overleaf for appointments and change of particulars

Date of termination

Position vacated (Mark appropriate box(es))

Day Month Year

1 2 0 1 2 0 0 5

X Person authorised to accept service on the company's behalf

X Person authorised to represent the company at the branch

Complete these details for resignation of any person authorised to accept service or process on the company's behalf or who was authorised to represent the company in relation to the business of the branch.

Name	MARLYN HOUSE		
Address	7 OLDBURY CLOSE		
	FRIMLEY, CAMBERLEY		
	SURREY, GU 16 8XT		

To whom should Companies House direct any enquires about the information on this form.



MRS. M. MOUSS

HUTCHINSON & CO. TRUST COMPANY LI

PRIORY COURT, TUSCAM WAY

CAMBERLEY, SURREY CLUB 327

Tel: 01276 482043

When completed, this form should be delivered to the address on page 4



APPOINTMENT

Persons authorised to represent the company or who may accept service or process

Give the name and address of the person appointed, together with the date of appointment. Mark the box(es) relevant to the appointment. If the appointment is to both positions mark both boxes.

* Delete as appropriate

SCOPE OF AUTHORITY

Give brief particulars of the extent of the powers exercised. (e.g. whether they are limited to powers expressly conferred by the instrument of appointment; or whether they are subject to express limitations.) Where the powers are exercised jointly give the name(s) of the person(s) concerned.

Mark box(es) as appropriate

*Style/Title	MR	
Forenames	RAYMOND LESLIE	
Surname	HUTCHINGS	
Address	5 PRIORY COURT	
	TUSCAM WAY	
Post town	CAMBERLEY	
County/Region	SURREY	Postcode GU15 3YX

*AND/OR

Is authorised to represent the company in relation to that business

Day Month Year

Date of appointment 1 1 1 0 1 8 2 1 0 1 0 1 4

The authority to represent the company is:-

Is # X Authorised to accept service of process on the company's behalf

*AND/OR

Is # | x | Authorised to represent the company in relation to that business

The extent of the authority to represent the company is:- (give details)

IN HIS CAPACITY AS COMPANY SECRETARY AND AS DIRECTED BY THE

DIRECTORS OF THE COMPANY

These powers:-

X May be exercised alone

OR

X Must be exercised with:-

(Give name(s) of co-authorised person(s))

JOY ELIZABETH POPE

PAUL FRANCIS SMYTHE

ANNE EAVES



CHANGE OF					
PARTICULARS	Dur Marile Mari				
	Data at abanca	Day Month Year			
	Date of change				
	\				
Mark the appropriate box. If change relates to both	Change of parti	iculars of person authorised to accept service			
positions, mark both boxes. Change of	Change of particulars of person authorised to represent the company				
name					
Name previously	Forenames				
notified to ◀ Companies House					
. –					
New name					
	Surname				
Change of residential address (enter new address)	Address				
	Post town				
		Postcode			
Change of authority to	· <u>-</u>				
act	The extent of the authority of the above person to represent the company has been altered to :- [give details]				
(this part does not apply	to [give details]				
to a person authorised to					
accept service on behalf of the company)					
or the company,					
Give brief particulars of					
any change in the authority of the officer to					
represent the company,					
including any alteration to	r in which the				
the manner in which the					
existing or new powers may be exercised (e.g.	# May be exercised alone OR				
requiring them to be					
exercised with other					
persons)	# Must be ex	xercised with:- (Give name(s) of co-authorised person(s))			
# Mark appropriate box					
					
6 1					
Signature) //			
	(Kant }			
* Delete as applicable	Signed	I was d			
		* (D irector / Secretary / P ermanent representitiv e)			
	Date ス分・	01. 2005			
		<u> </u>			

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