



# BR6

CHFP025

Please complete in typescript,  
or in bold black capitals.

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

Company number

FC 24699

Branch number **BR 7199**

Company name

PRIORY FINANCE COMPANY LIMITED

Branch name

(if different to  
corporate name)

## TERMINATION OF AUTHORITY

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

See overleaf for  
appointments and  
change of particulars

	Day	Month	Year
Date of termination	09	03	2007
Position vacated (Mark appropriate box(es))	<input checked="" type="checkbox"/>	Person authorised to accept service on the company's behalf	
	<input checked="" type="checkbox"/>	Person authorised to represent the company at the branch	
Name	DR CHAI PATEL		
Address	THE THATCHED HOUSE MANOR WAY OXSHOTT SURREY KT22 0HU		

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

James West, Fried Frank Harris Shriver & Jacobson LLP  
99 City Road  
LONDON  
EC1Y 1AX

Tel 0207 972 9205

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**

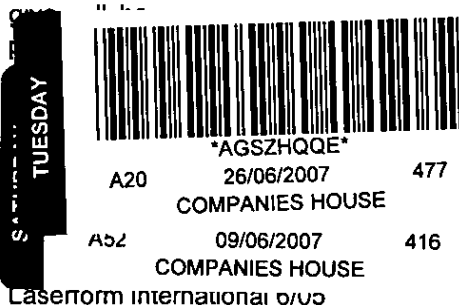
for branches registered in England and Wales

or

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

for branches registered in Scotland

**DX 235 Edinburgh  
or LP - 4 Edinburgh 2**



## 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

†† 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

☐

\* 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 PROFESSOR

Forenames CHRISTOPHER

Surname THOMPSON

Address †† 3 PRESHAW HOUSE, PREHSAW  
UPHAM

Post town SOUTHAMPTON

County / Region HAMPSHIRE Postcode S032 1HP

Date of appointment

Day		Month		Year			
2	3	0	4	2	0	0	7

The authority to represent the company is -

☒ # Is authorised to accept service of process on the company's behalf

\* AND ~~OR~~

☒ # Is authorised to represent the company in relation to that business

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

To represent the Company on administrative and day-to-day matters including the execution of contracts subject to restrictions contained in the articles of association of the Company

These powers -

# ☒ May be exercised alone

OR

# ☐ Must be exercised with -

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

# CHANGE OF PARTICULARS

Mark the appropriate box. If change relates to both positions, mark both boxes

Name previously notified to Companies House

## Change of name

New name

## Change of residential address <sup>††</sup> (enter new address)

<sup>††</sup> 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

☐

## Change of authority to act

(this part does not apply to a person authorised to accept service on behalf of the company)

Give brief particulars of any change in the authority of the officer to represent the company, including any alteration to the manner in which the existing or new powers may be exercised (e.g. requiring them to be exercised with other persons)

# Mark appropriate box

Date of change

Day	Month	Year

☐

Change of particulars of person authorised to accept service

☐

Change of particulars of person authorised to represent the company

Forenames

Surname

Forenames

Surname

Address

Post town

County / Region

Postcode

Country

The extent of the authority of the above person to represent the company has been altered to - [give details]

The powers -

# ☐

May be exercised alone

OR

# ☐

Must be exercised with (Give name(s) of co-authorised person(s))

Signature

Signed

*Carole Vane*

\* (director / ~~secretary~~ / permanent representative)

Date

8/6/07

\* Delete as applicable